oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. RMC PRESIDENT

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under

SIGNATURE: LAVERNE CUMMINGS

617 W/ AATU OTDEET		

Entity Name: TWIN TOWERS RESIDENT COUNCIL, INC.

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

617 W 441H SIREEI 202 JACKSONVILLE, FL 32208 US

DOCUMENT# N09000010208

617 W 44TH STREET

JACKSONVILLE, FL 32208

Current Mailing Address:

202

Current Principal Place of Business:

FEI Number: 80-0188750

Name and Address of Current Registered Agent:

EDWARDS, GREGORY 617 W 44TH STREET #142 JACKSONVILLE, FL 32208 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	P	Title	V
Name	CUMMINGS, LAVERNE	Name	EDWARDS, GREGORY
Address	617 W 44TH STREET - APT. #68	Address	617 W 44TH STREET - APT. 142
City-State-Zip:	JACKSONVILLE FL 32208	City-State-Zip:	JACKSONVILLE FL 32208
		-	2
Title	т	Title	S
Title Name	T GRAY, MARIAN	Title Name	S BALKCON, PATRICIA
	T GRAY, MARIAN 617 W 44TH STREET - APT. 69		-

Certificate of Status Desired: No

Electronic Signature of Signing Officer/Director Detail

Date