

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09857

Entity Name: NAIOP OF NORTHEAST FLORIDA, INC.**Current Principal Place of Business:**1301 RIVERPLACE BOULEVARD JACKSONVILLE, FL 32207
JACKSONVILLE, FL 32207**Current Mailing Address:**PO BOX 10681
JACKSONVILLE, FL 32247-0681 US**FEI Number:** 59-2551921**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCOTT, ERIN
1301 RIVERPLACE BOULEVARD
JACKSONVILLE, FL 32207 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:** ERIN SCOTT

03/01/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	KIRCHNER, KATIE
Address	422 JACKSONVILLE DRIVE
City-State-Zip:	JACKSONVILLE FL 32250

Title	TREASURER
Name	SCOTT, ERIN
Address	1301 RIVERPLACE BLVD.
City-State-Zip:	JACKSONVILLE FL 32207

Title	PRESIDENT - ELECT
Name	OLDENBURG, CHRISTIAN
Address	76 S. LAURA ST 1500
City-State-Zip:	JACKSONVILLE FL 32202

Title	EXECUTIVE DIRECTOR
Name	DAVIS, LAUREN
Address	P. O. BOX 10681
City-State-Zip:	JACKSONVILLE FL 32247-0681

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 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.

SIGNATURE: LAUREN DAVIS**EXECUTIVE DIRECTOR**

03/01/2023

Electronic Signature of Signing Officer/Director Detail

Date