

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000011609

**Entity Name:** NORTHEAST FLORIDA WOMEN VETERAN, INC

**Current Principal Place of Business:**

103 CENTURY 21 DRIVE SUITE 201  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

103 CENTURY 21 DRIVE SUITE 201  
JACKSONVILLE, FL 32216 US

**FEI Number:** 30-0758834

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

QUARANTA, DELORIS M  
103 CENTURY 21 DRIVE SUITE 201  
JACKSONVILLE, FL 32216 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

Date

**Officer/Director Detail :**

Title CEO/PRESIDENT  
Name QUARANTA, DELORIS M  
Address 2133 BROADWAY AVENUE  
City-State-Zip: JACKSONVILLE FL 32209

Title DIRECTOR  
Name CUDJOE-HODGE, SUZETTE  
Address 2133 BROADWAY AVENUE  
City-State-Zip: JACKSONVILLE FL 32209

Title BOARD CHAIRMAN  
Name WOLFE, PATRICIA CHAIR  
Address 2133 BROADWAY AVENUE  
City-State-Zip: JACKSONVILLE FL 32209

Title BOARD MEMBER  
Name SPENCER, ELAINE  
Address 2133 BROADWAY AVENUE  
City-State-Zip: JACKSONVILLE FL 32209

Title SECRETARY  
Name BROWN, JENNIFER  
Address 1233 BROADWAY AVE  
City-State-Zip: JACKSONVILLE FL 32209

Title BOARD MEMBER  
Name FIELDS, CHARLES  
Address 2133 BROADWAY AVENUE  
City-State-Zip: JACKSONVILLE FL 32209

*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:** DELORIS QUARANTA

CEO/PRESIDENT

05/14/2020

Electronic Signature of Signing Officer/Director Detail

Date