2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000008671

Entity Name: JACKSONVILLE WOMEN'S LEADERSHIP FORUM, INC.

FILED
Apr 16, 2018
Secretary of State
CC2000058093

Current Principal Place of Business:

50 NORTH LAURA SUITE 3900

JACKSONVILLE, FL 32202

Current Mailing Address:

50 NORTH LAURA STREET SUITE 3900 JACKSONVILLE, FL 32202 US

FEI Number: 46-3938058 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS RD #221E PALM BEACH GARDENS, FL 33410 US

SUITE 100

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 VP Title PRESIDENT

Name ROSE, CINDY A Name SCHWING, CHRISTINA M ESQ.

Address 501 RIVERSIDE AVENUE Address 50 N. LAURA STREET

SUITE 3900

City-State-Zip: JACKSONVILLE FL 32202 City-State-Zip: JACKSONVILLE FL 32202

 Title
 DIRECTOR
 Title
 SECRETARY ELECT

 Name
 HILL, MIRIAM
 Name
 LOVE, JACQUELYN I

Address 10 N. 15TH STREET Address 1762 CHANDELIER CIRCLE EAST

City-State-Zip: FERNANDINA BEACH FL 32034 City-State-Zip: JACKSONVILLE FL 32225

Title DIRECTOR Title TREASURER

Name CIRCELLI, MELISSA Name LUSK, JENNIFER

Address 601 RIVERSIDE AVENUE Address 13410 SUTTON PARK DRIVE SOUTH

City-State-Zip: JACKSONVILLE FL 32204 City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR Title DIRECTOR

Name STANFORD, WALETTE Name BOGGS, SUSAN T

Address 2160 WALNUT CREEK COURT NORTH Address 301 W. BAY STREET

STE. 2600

City-State-Zip: JACKSONVILLE FL 32246 City-State-Zip: JACKSONVILLE FL 32202

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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: CHRISTINA M. SCHWING PRESIDENT

Electronic Signature of Signing Officer/Director Detail

04/16/2018 Date

Officer/Director Detail Continued:

Title TREASURER ELECT
Name BARRE, JENNIFER

Address 501 RIVERSIDE AVENUE

SUITE 100

City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name CONROY, JAMIE

Address 1 INDEPENDENT DRIVE

114

City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name MATWAY, LISA

Address 50 NORTH LAURA STREET

SUITE 3900

City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR

Name MCGREGOR, SHANNON
Address 1 EVERBANK DRIVE

City-State-Zip: JACKSONVILLE FL 32202

Title SECRETARY
Name IVEY, FELICIA

Address 10151 DEERWOOD PARK BLVD

BLD 200 400

City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name KRISTOFF, KIM

Address 6600 CORPORATE CENTER PKWY

City-State-Zip: JACKSONVILLE FL 32216

Title DIRECTOR

Name BLAGSVEDT, SARAH

Address 301 W. BAY STREET

2600

City-State-Zip: JACKSONVILLE FL 32202