

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000008847

Entity Name: 904WARD, INC.**Current Principal Place of Business:**501 RIVERSIDE AVENUE, SUITE 600
JACKSONVILLE, FL 32202**Current Mailing Address:**501 RIVERSIDE AVENUE, SUITE 600
JACKSONVILLE, FL 32202 US**FEI Number:** 82-2604507**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FISHER, TOUSEY, LEAS & BALL, P.A.
501 RIVERSIDE AVENUE, SUITE 600
JACKSONVILLE, FL 32202 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	D/VP
Name	TOUSEY, TRACY
Address	501 RIVERSIDE AVENUE, SUITE 600
City-State-Zip:	JACKSONVILLE FL 32202

Title	D
Name	PATZ, MELANIE
Address	501 RIVERSIDE AVENUE, SUITE 600
City-State-Zip:	JACKSONVILLE FL 32202

Title	D & P
Name	ALLEN, KIMBERLY
Address	501 RIVERSIDE AVENUE, SUITE 600
City-State-Zip:	JACKSONVILLE FL 32202

Title	D & S
Name	CONNER, DEIRDRE
Address	501 RIVERSIDE AVENUE, SUITE 600
City-State-Zip:	JACKSONVILLE FL 32202

Title	D & T
Name	CSAR, TREY
Address	501 RIVERSIDE AVENUE, SUITE 600
City-State-Zip:	JACKSONVILLE FL 32202

Title	D
Name	SHERMAN, LYNN
Address	501 RIVERSIDE AVENUE, SUITE 600
City-State-Zip:	JACKSONVILLE FL 32202

Title	D
Name	MAIRA, MARTELO
Address	501 RIVERSIDE AVENUE, SUITE 600
City-State-Zip:	JACKSONVILLE FL 32202

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: TRACY TOUSEY

VICE PRESIDENT

04/27/2020

Electronic Signature of Signing Officer/Director Detail_____
Date