

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46543

Entity Name: NORTH EAST BUSINESS ASSOCIATION, INC.

Current Principal Place of Business:

2791 CAPITAL CIR NE
TALLAHASSEE, FL 32308

Current Mailing Address:

PO BOX 37032
TALLAHASSEE, FL 32315 US

FEI Number: 59-3091799

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROLEY, WILL
2814 REMINGTON CIRCLE
TALLAHASSEE, FL 32308 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: WILL CROLEY

04/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name WILL, CROLEY
Address 2814 REMINGTON CIRCLE
City-State-Zip: TALLAHASSEE FL 32308

Title SECRETARY, DIRECTOR
Name CHAPMAN, CORA ANN
Address 3436 WEEMS ROAD
City-State-Zip: TALLAHASSEE FL 32317

Title PAST PRESIDENT, DIRECTOR
Name MUNROE, MARGARET
Address 2791 CAPITAL CIR NE
City-State-Zip: TALLAHASSEE FL 32308

Title PAST PRESIDENT, DIRECTOR
Name BISHOP, BARNEY T. III
Address 204 SOUTH MONROE STREET
 SUITE 201
City-State-Zip: TALLAHASSEE FL 32301

Title TREASURER, DIRECTOR
Name HARDEE, KAILA
Address 1301 METROPOLITAN BOULEVARD
City-State-Zip: TALLAHASSEE FL 32308

Title PRESIDENT-ELECT, DIRECTOR
Name BAER, CATHERINE
Address 2791 CAPITAL CIR NE
City-State-Zip: TALLAHASSEE FL 32308

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: KAILA HARDEE

TREASURER

04/13/2017

Electronic Signature of Signing Officer/Director Detail

Date