

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N47646

**Entity Name:** SOUTHEAST CHAPTER, R&LHS, INC.

**Current Principal Place of Business:**

3454 CORMORANT COVE DRIVE  
JACKSONVILLE, FL 32223-2790

**Current Mailing Address:**

P.O. BOX 600544  
JACKSONVILLE, FL 32260-0544 US

**FEI Number:** 59-3129097

**Certificate of Status Desired:** No

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

HOWES, WILLIAM F  
3454 CORMORANT COVE DRIVE  
JACKSONVILLE, FL 32223-2790 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 DIRECTOR  
Name SMITH, JAMES A  
Address 2885 CIRCLE RIDGE DR  
City-State-Zip: ORANGE PARK FL 32065-5763

Title VP, DIRECTOR  
Name HOWES, WILLIAM F  
Address 3454 CORMORANT COVE DR  
City-State-Zip: JACKSONVILLE FL 32223-2790

Title TREASURER  
Name VERTESCHER, STEPHEN J  
Address 785 OAKLEAF PLANTATION PKWY,  
UNIT 211  
City-State-Zip: ORANGE PARK FL 32065-3505

Title PRESIDENT  
Name BAXENDALE, STEVEN A  
Address 299 TORTUGA BAY DRIVE  
City-State-Zip: ST. AUGUSTINE FL 32092-3209

Title DIRECTOR  
Name TOWSON, ARTHUR L  
Address 3638 COLONY COVE TRAIL  
City-State-Zip: JACKSONVILLE FL 32277-2206

Title SECRETARY  
Name HOLMGREN, JOHN S  
Address 988 BLACKBERRY LANE  
City-State-Zip: JACKSONVILLE FL 32259-4385

*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:** WILLIAM F. HOWES

**VICE PRESIDENT**

**04/18/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date