## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49396

Entity Name: FLORIDA JUSTICE ASSOCIATION RESEARCH AND

EDUCATION FOUNDATION, INC.

**Current Principal Place of Business:** 

218 S MONROE ST TALLAHASSEE, FL 32301

**Current Mailing Address:** 

218 S MONROE ST

TALLAHASSEE, FL 32301

FEI Number: 59-3144722 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COTTERALL, WILLIAM 218 S MONROE ST TALLAHASSEE, FL 32301 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: WILLIAM COTTERALL 04/07/2025

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **DIRECTOR** Title CHAIRMAN

Name PORTER, JEFFREY A. Name BRIGGS, LAURIE J. ESQ.

Address 218 S MONROE ST Address 2139 PALM BEACH LAKES BLVD City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip: WEST PALM BEACH FL 33409-6601

Title **DIRECTOR** Title DIRECTOR

Name BRAZZELL, JOHN Name MICHAELS, TODD J ESQ. Address 218 S. MONROE ST Address 330 ALHAMBRA CIR FL 1

City-State-Zip: CORAL GABLES FL 33134-5004 City-State-Zip: TALLAHASSEE FL 32301

Title **DIRECTOR** Title DIRECTOR

Name GUARNIERI, JAMES W. ESQ. Name DELONG, MICHELLE N. ESQ.

Address 214 S ARMENIA AVE 5500 MILITARY TRL STE 22 PMB 117 Address City-State-Zip: TAMPA FL 33609-3310 JUPITER FL 33458-2871 City-State-Zip:

Title **TREASURY** Title **DIRECTOR** 

Name EDWARDS, THOMAS S. JR., ESQ. SMYTH, MONICA BESBRIS ESQ. Name Address 4401 SALISBURY RD STE 200 Address 338 N MAGNOLIA AVE STE B JACKSONVILLE FL 32216-8715 City-State-Zip:

ORLANDO FL 32801-1653 City-State-Zip:

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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: JEFFREY PORTER

**EXECUTIVE DIRECTOR** 

04/07/2025

**FILED** Apr 07, 2025

**Secretary of State** 

3138249463CC

## Officer/Director Detail Continued:

Title SECRETARY Title DIRECTOR

Name ROMANO, ERIC ESQ. Name WAYLON, THOMPSON ESQ.

Address 801 SPENCER DRIVE Address PO BOX 1470

City-State-Zip: WEST PALM BEACH FL 33409-4027 City-State-Zip: PANAMA CITY FL 32402-1470

Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE

Name MCCARTNEY, LYNN Name EAGEN, MICHELLE S. CPA

Address 218 S MONROE ST Address 218 S MONROE ST

City-State-Zip: TALLAHASSEE FL 32301 City-State-Zip: TALLAHASSEE FL 32301