

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50328

Entity Name: PROFESSIONAL DEVELOPMENT RESOURCES, INC.**Current Principal Place of Business:**201 25TH AVE. SOUTH
UNIT N-23
JACKSONVILLE BEACH, FL 32250**Current Mailing Address:**PO BOX 550659
JACKSONVILLE, FL 32255-0659 US**FEI Number: 59-3138625****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ULERY GUNDERSON, GINA MARIA
3238 CROSBY LN
JACKSONVILLE, FL 32216 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:** GINA ULERY GUNDERSON

02/19/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	ULERY GUNDERSON, GINA MARIA
Address	PO BOX 550659
City-State-Zip:	JACKSONVILLE FL 32255-0659

Title	VP
Name	CHRISTIE, LEO A PHD
Address	201 25TH AVE. SOUTH UNIT N-23
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	VP
Name	CHRISTIE, CATHERINE
Address	201 25TH AVE. SOUTH UNIT N-23
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	SECRETARY, TREASURER
Name	GUNDERSON, PAUL D
Address	PO BOX 550659
City-State-Zip:	JACKSONVILLE FL 32255-0659

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: GINA MARIA ULERY GUNDERSON

P,D

02/19/2019

Electronic Signature of Signing Officer/Director Detail

Date