

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N08000003814

**Entity Name:** CLAY COUNTY CRUZERS, INC.

**Current Principal Place of Business:**

437 PERDIDO DRIVE  
FLEMING ISLAND, FL 32003

**Current Mailing Address:**

437 PERDIDO DRIVE  
FLEMING ISLAND, FL 32003 US

**FEI Number:** 26-2273333

**Certificate of Status Desired:** Yes

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

HOURIHANE, MICHAEL  
437 PERDIDO DRIVE  
FLEMING ISLAND, FL 32003 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:** MICHAEL HOURIHANE

10/07/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name HOURIHANE, MICHAEL  
Address 437 PERDIDO DRIVE  
City-State-Zip: FLEMING ISLAND FL 32003

Title 1VP  
Name PUDOFF, ANTHONY  
Address 1766 WATERBURY LANE  
City-State-Zip: FLEMING ISLAND FL 32003

Title 2VP  
Name ROSS, FRED  
Address 1865 COPPER STONE DRIVE  
City-State-Zip: FLEMING ISLAND FL 32003

Title T  
Name HORNER, PATRICIA  
Address 3010 PONY LANE  
City-State-Zip: MIDDLEBURG FL 32068

Title S  
Name RICE, RONALD  
Address 1744 HORTON DRIVE  
City-State-Zip: ORANGE PARK FL 32073

Title MAL  
Name VARGAS, KEN  
Address 1515 WINSTON LANE  
City-State-Zip: FLEMING ISLAND FL 32003

*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:** PATRICIA HORNER

T

10/07/2019

Electronic Signature of Signing Officer/Director Detail

Date