

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000003814

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

**Current Principal Place of Business:**

2569 AQUARIUS ROAD  
ORANGE PARK, FL 32073

**Current Mailing Address:**

2569 AQUARIUS ROAD  
ORANGE PARK, FL 32073

**FEI Number: 26-2273333**

**Certificate of Status Desired: No**

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

LOGSDON, NORBERT EJR.  
2569 AQUARIUS ROAD  
ORANGE PARK, FL 32073 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 P  
Name LOGSDON, NORBERT EJR.  
Address 2569 AQUARIUS ROAD  
City-State-Zip: ORANGE PARK FL 32073

Title 1VP  
Name HAWTHORNE, GENE  
Address 673 ROGER SHERMAN STREET  
City-State-Zip: ORANGE PARK FL 32073

Title 2VP  
Name STRICKLEN, JAMES O  
Address 389 AQUARIUS CONCOURSE  
City-State-Zip: ORANGE PARK FL 32073

Title T  
Name LABELLA, LAURA  
Address 2705 JULIE LANE  
City-State-Zip: MIDDLEBURG FL 32068

Title S  
Name DAY, MICHAEL  
Address 1514 WATERBRIDGE COURT  
City-State-Zip: FLEMING ISLAND FL 32003

Title MAL  
Name MARCY, TOMMY  
Address 3270BYRON ROAD  
City-State-Zip: GREEN COVE SPRINGS FL 32043

*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: NORBERT LOGSDON, JR.**

**P**

**04/23/2015**

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

\_\_\_\_\_  
Date