

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16764

Entity Name: JACKSONVILLE CORVETTE CLUB, INC.**Current Principal Place of Business:**11842 REMSEN ROAD
JACKSONVILLE, FL 32223**Current Mailing Address:**11842 REMSEN ROAD
JACKSONVILLE, FL 32223 US**FEI Number:** 03-0379110**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAUSCH, LAWRENCE R.
712 SOUTH EDGEWOOD AVENUE
JACKSONVILLE, FL 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	PRESIDENT
Name	TAYLOR, BRUCE J
Address	11842 REMSEN ROAD
City-State-Zip:	JACKSONVILLE FL 32223

Title	TREASURER
Name	FISHER, JAMES
Address	7601 PUTTERS COVE DRIVE
City-State-Zip:	JACKSONVILLE FL 32256

Title	REP
Name	POTTS, STEVE
Address	2285 MARSH HAWK LANE APT 19-104
City-State-Zip:	FLEMING ISLAND FL 32003

Title	VP
Name	BRETZ, BRIAN
Address	246 CEZANNE
City-State-Zip:	PONTE VEDRA FL 32081

Title	SECRETARY
Name	TAYLOR, CYNTHIA A
Address	11842 REMSEN ROAD
City-State-Zip:	JACKSONVILLE FL 32223

Title	OAL
Name	CARNEY, PAT
Address	11809 CATRAKEE DRIVE
City-State-Zip:	JACKSONVILLE FL 32223

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: BRUCE J TAYLOR**PRESIDENT****02/07/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date