

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000006656

**Entity Name:** CEDAR RIVER CLUB OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

5700 SAN JUAN AVENUE  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

P.O. BOX 7333  
JACKSONVILLE, FL 32238

**FEI Number:** 59-3544526

**Certificate of Status Desired:** No

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

ROBERTS, CRAIG  
3436 LAKE SHORE BLVD  
#7  
JACKSONVILLE, FL 32210 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:** CRAIG ROBERTS

04/09/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            CARNEY, JAY  
Address        5729 CEDAR OAKS DRIVE  
City-State-Zip: JACKSONVILLE FL 32210

Title            VP  
Name            LOMAX, ANDY  
Address        4455 YACHT CLUB DRIVE  
City-State-Zip: JACKSONVILLE FL 32210

Title            SECY  
Name            HOWELL, CONNIE  
Address        4856 BEEFEATERS RD  
City-State-Zip: JACKSONVILLE FL 32210

Title            TR  
Name            SMID, VICKI  
Address        5106 IMPERIAL COVE RD  
City-State-Zip: JACKSONVILLE FL 32210

*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:** JAY CARNEY

PRESIDENT

04/09/2014

Electronic Signature of Signing Officer/Director Detail

Date