2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007219

FILED Mar 05, 2012 Secretary of State

Entity Name: CLAY COUNTY SENIOR ADULT ADVOCACY COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business:

3651 US HWY 17

ORANGE PARK, FL 32003 US

Current Mailing Address: New Mailing Address:

4452 BLACK ALDER CT 12137 MILLFORD LANE NORTH JACKSONVILLE, FL 32258 US JACKSONVILLE, FL 32246 US

FEI Number: 59-3751734 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MAINWARING, JAMES M TREASUR 4452 BLACK ALDER CT JACKSONVILLE, FL 32258 US MAINWARING, JAMES M TREASUR 12137 MILLFORD LANE NORTH JACKSONVILLE, FL 32246 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: JAMES M MAINWARING 03/05/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES

Name: WARNAAR, BARBARA
Address: 728 BLANDING BLVD SUITE A
City-St-Zip: ORANGE PARK, FL 32065 US

Title: TREA

Name: MAINWARING, JAMES M
Address: 12137 MILLFORD LANE NORTH
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: SECR

Name: LAIRD, WILLIAM JR

Address: 6622 SOUTHPOINT DRIVE SOUTH, SUITE 496

City-St-Zip: JACKSONVILLE, FL 32216

Title: VF

 Name:
 REYNOLDS, MADELINE M

 Address:
 3651 US HIGHWAY 17

 City-St-Zip:
 ORANGE PARK, 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: JAMES M MAINWARING TREA 03/05/2012