

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000002349

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** SHERIFF'S FOUNDATION OF NASSAU COUNTY, INC.

**Current Principal Place of Business:**

76001 BOBBY MOORE CIRCLE  
YULEE, FL 32097

**New Principal Place of Business:**

**Current Mailing Address:**

76001 BOBBY MOORE CIRCLE  
YULEE, FL 32097

**New Mailing Address:**

**FEI Number:** 26-2139660

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLARK, MARLYNE S  
76001 BOBBY MOORE CIRCLE  
YULEE, FL 32097 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** SEAGRAVES, JR., T.L.  
**Address:** 76001 BOBBY MOORE CIRCLE  
**City-St-Zip:** YULEE, FL 32097

**Title:** D  
**Name:** DRAKE, DAVID  
**Address:** POST OFFICE BOX 516  
**City-St-Zip:** YULEE, FL 32097

**Title:** ST  
**Name:** CRAWFORD, ROBERT  
**Address:** 76001 BOBBY MOORE CIRCLE  
**City-St-Zip:** YULEE, FL 32097

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:** ROBERT CRAWFORD

ST

04/26/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date