

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000003711

1. Entity Name

CEDAR RIVER CLUB, INC.

Principal Place of Business

5039 NORMANDY BOULEVARD
JACKSONVILLE FL 32205

Mailing Address

5039 NORMANDY BOULEVARD
JACKSONVILLE FL 32205-4849

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3344188

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POUCHER, ALLEN L.
320 EAST ADAMS STREET
JACKSONVILLE FL 32202

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME GRIFFIN, RICHARD
STREET ADDRESS 1570 S LANE AVE
CITY-ST-ZIP JACKSONVILLE FL 32210 ☒ Delete

TITLE PD
NAME POWER, GORDON
STREET ADDRESS 5546 CLIFF STREET
CITY-ST-ZIP JACKSONVILLE, FL 32205 ☐ Change ☒ Addition

TITLE VD
NAME SWANSON, SANDRA
STREET ADDRESS 4633 SUNDERLAND RD
CITY-ST-ZIP JACKSONVILLE FL 32210 ☒ Delete

TITLE VP
NAME LANSING, BETSY
STREET ADDRESS 8669 GREAT PINE LANE W.
CITY-ST-ZIP JACKSONVILLE, FL 32244 ☐ Change ☒ Addition

TITLE TD
NAME SPENCER, WILLIAM M JR.
STREET ADDRESS 8255 BARRACUDA ROAD
CITY-ST-ZIP JACKSONVILLE FL 32244 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD
NAME LANSING, BETSY
STREET ADDRESS 8669 GREAT PINE LANE W
CITY-ST-ZIP JACKSONVILLE FL 32244 ☒ Delete

TITLE SD
NAME STALVEY, WANDA
STREET ADDRESS 6026 WILSON BLVD.
CITY-ST-ZIP JACKSONVILLE, FL 32210 ☐ Change ☒ Addition

TITLE D
NAME BUTTS, KARRY
STREET ADDRESS 2240 BAYVIEW RD
CITY-ST-ZIP JACKSONVILLE FL 32210 ☒ Delete

TITLE D
NAME GRIFFIN, RICHARD
STREET ADDRESS 1570 S. LANE AVENUE
CITY-ST-ZIP JACKSONVILLE, FL 32210 ☐ Change ☒ Addition

TITLE D
NAME STONE, DARRELL
STREET ADDRESS 9842 103RD STREET LT. 76
CITY-ST-ZIP JACKSONVILLE FL 32210 ☒ Delete

TITLE D
NAME POOR, DONALD
STREET ADDRESS 353 LAKE MARIETTA DRIVE
CITY-ST-ZIP JACKSONVILLE, FL 32228 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Gordon Power 3-5-2000 693-1030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90016 014 ****61.25

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DO NOT WRITE IN THIS SPACE