

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007219

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

Current Principal Place of Business:

1775 EAGLE HARBOR PKWY
FLEMING ISLAND , FL 32003

Current Mailing Address:

PO BOX 8779
FLEMING ISLAND, FL 32006 US

FEI Number: 59-3751734

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLY, JAMI J
1248 KINGSLEY AVE.
ORANGE PARK, FL 32073 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: JAMI KELLY

07/25/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name KELLY, JAMI PRES
Address 1248 KINGSLEY AVE.
City-State-Zip: ORANGE PARK FL 32073

Title VP
Name COHEN, ERNEST W VP
Address 1726 KINGSLEY AVE.
 SUITE 2
City-State-Zip: ORANGE PARK FL 32073

Title SECR
Name AGNEW GEER, RITA SECR
Address 1709 SHORELINE PL
City-State-Zip: ORANGE PARK FL 32073

Title TREASURER
Name SNARE, SHEREEN
Address 604 WALNUT ST
City-State-Zip: GREEN COVE SPRINGS FL 32043

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: SHEREEN SNARE

TREASURER

07/25/2016

Electronic Signature of Signing Officer/Director Detail

Date