2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000003397

Entity Name: CLAY COUNTY ECONOMIC DEVELOPMENT CORPORATION

FILED Mar 06, 2024 **Secretary of State** 8267219306CC

Current Principal Place of Business:

1845 TOWN CENTER BLVD.

110B

FLEMING ISLAND, FL 32003

Current Mailing Address:

1845 TOWN CENTER BLVD.

110B

FLEMING ISLAND, FL 32003 US

FEI Number: 46-5287847 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAVLUS, LAURA 1845 TOWN CENTER BLVD

FLEMING ISLAND, FL 32003 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: LAURA PAVLUS 03/06/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **CHAIRMAN** Title D

Name EGAN, GEORGE Name MCGOWAN, TED

1845 TOWN CENTER BLVD. 1845 TOWN CENTER BLVD. Address Address

110B

110B

City-State-Zip: FLEMING ISLAND FL 32003 City-State-Zip: FLEMING ISLAND FL 32003

Title D Title D

Name AGRESTI, JERRY Name MOBLEY, JOE

Address 1845 TOWN CENTER BLVD. Address 1845 TOWN CENTER BLVD.

110B

City-State-Zip: FLEMING ISLAND FL 32003 City-State-Zip: FLEMING ISLAND FL 32003

Title Title D

KNIGHT, BRIAN ROYAL, VAN Name Name

1845 TOWN CENTER BLVD. 1845 TOWN CENTER BLVD. Address Address 110B

110B

City-State-Zip: FLEMING ISLAND FL 32003 City-State-Zip: FLEMING ISLAND FL 32003

Title Title D D

Name JOE, PICKEN Name PATRICK, CHAD

Address 1845 TOWN CENTER BLVD. Address 1845 TOWN CENTER BLVD.

110B

FLEMING ISLAND FL 32003 FLEMING ISLAND FL 32003 City-State-Zip: City-State-Zip:

Continues on page 2

110B

110B

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.

03/06/2024 SIGNATURE: CRAWFORD POWELL **PRESIDENT**

Officer/Director Detail Continued:

Title PRESIDENT

Name POWELL, CRAWFORD

Address 1845 TOWN CENTER BLVD.

110B

City-State-Zip: FLEMING ISLAND FL 32003