

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000003397

Entity Name: CLAY COUNTY ECONOMIC DEVELOPMENT CORPORATION**Current Principal Place of Business:**321 WALNUT STREET
GREEN COVE SPRINGS, FL 32043**Current Mailing Address:**PO BOX 338
GREEN COVE SPRINGS, FL 32043 US**FEI Number:** 46-5287847**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**POWELL, CRAWFORD
321 WALNUT STREET
GREEN COVE SPRINGS, FL 32043 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:** CRAWFORD POWELL

04/14/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIRMAN
Name	EGAN, GEORGE
Address	321 WALNUT STREET
City-State-Zip:	GREEN COVE SPRINGS FL 32043

Title	DIRECTOR
Name	MCGOWAN, TED
Address	321 WALNUT STREET
City-State-Zip:	GREEN COVE SPRINGS FL 32043

Title	DIRECTOR
Name	AGRESTI, JERRY
Address	321 WALNUT STREET
City-State-Zip:	GREEN COVE SPRINGS FL 32043

Title	DIRECTOR
Name	MOBLEY, JOE
Address	321 WALNUT STREET
City-State-Zip:	GREEN COVE SPRINGS FL 32043

Title	DIRECTOR
Name	KNIGHT, BRIAN
Address	321 WALNUT STREET
City-State-Zip:	GREEN COVE SPRINGS FL 32043

Title	DIRECTOR
Name	ROYAL, VAN
Address	321 WALNUT STREET
City-State-Zip:	GREEN COVE SPRINGS FL 32043

Title	DIRECTOR
Name	PICKEN, JOE
Address	321 WALNUT STREET
City-State-Zip:	GREEN COVE SPRINGS FL 32043

Title	DIRECTOR
Name	PATRICK, CHAD
Address	321 WALNUT STREET
City-State-Zip:	GREEN COVE SPRINGS FL 32043

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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: CRAWFORD POWELL**PRESIDENT**

04/14/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name POWELL, CRAWFORD
Address 321 WALNUT STREET
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name MILLER, FRANK
Address 321 WALNUT STREET
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name FERGUSON, BRUCE
Address 321 WALNUT STREET
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name RATHJEN, MICHAEL
Address 321 WALNUT STREET
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name WILBANKS, MORGAN
Address 321 WALNUT STREET
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name BUCK, RUSSELL
Address 321 WALNUT STREET
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name MCGARITY, BRIAN
Address 321 WALNUT STREET
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name WALRATH, BRYAN
Address 321 WALNUT STREET
City-State-Zip: GREEN COVE SPRINGS FL 32043