

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000003397

Entity Name: CLAY COUNTY ECONOMIC DEVELOPMENT CORPORATION**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**FEI Number:** 46-5287847**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARRIS, JAMIE-JOE A
1845 TOWN CENTER BLVD
110B
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:** JAMIE-JOE HARRIS

04/06/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name LEBESCH, ANNA DR.
Address 1845 TOWN CENTER BLVD.
110B
City-State-Zip: FLEMING ISLAND FL 32003

Title D
Name ROYAL, BERT V
Address 3616 MAGNOLIA POINT BLVD
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title PRESIDENT
Name HARRIS, JAMIE-JOE A
Address 1845 TOWN CENTER BLVD.
110B
City-State-Zip: FLEMING ISLAND FL 32003

Title D
Name MCGOWAN, PAUL T
Address 1065 BULKHEAD ROAD
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name PATRICK, CHAD
Address 1845 TOWN CENTER BLVD.
110B
City-State-Zip: FLEMING ISLAND FL 32003

Title CHAIRMAN
Name EGAN, GEORGE
Address 1845 TOWN CENTER BLVD.
110B
City-State-Zip: FLEMING ISLAND FL 32003

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: JAMIE-JOE HARRIS**EXECUTIVE DIRECTOR**

04/06/2018

Electronic Signature of Signing Officer/Director Detail

Date