

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739177

FILED
Mar 20, 2012
Secretary of State

Entity Name: BLACK HAMMOCK ISLAND CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

15770 SAWPIT RD
JACKSONVILLE, FL 32226 US

New Principal Place of Business:

Current Mailing Address:

15561 FLOUNDER RD
JACKSONVILLE, FL 32226 US

New Mailing Address:

FEI Number: 59-2104167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, MARY E
15561 FLOUNDER RD
JACKSONVILLE, FL 32226 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: MILLIGAN, RONALD
Address: 10210 SAWPIT RD
City-St-Zip: JACKSONVILLE, FL 32226

Title: VP
Name: LEE, CHARLES
Address: 15930 SHARK RD W
City-St-Zip: JACKSONVILLE, FL 32226

Title: T
Name: CASWELL, ANN
Address: 15648 SHARK RD. W
City-St-Zip: JACKSONVILLE, FL 32226

Title: P
Name: THOMPSON, MARY
Address: 15561 FLOUNDER ROAD
City-St-Zip: JACKSONVILLE, FL 32226

Title: S
Name: MILLIGAN, JANICE
Address: 10210 SAWPIT RD
City-St-Zip: JACKSONVILLE, FL 32226

Title: D
Name: THOMPSON, JACK
Address: 15561 FLOUNDER RD
City-St-Zip: JACKSONVILLE, FL 32226

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: MARY THOMPSON

P

03/20/2012

Electronic Signature of Signing Officer or Director

Date