

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Dec 09, 2008  
Secretary of State**

DOCUMENT# N03000009644

**Entity Name:** SILVER CREEK OF CLAY COUNTY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

463499 STATE ROAD 200  
YULEE, FL 32097 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1987  
YULEE, FL 320411987 US

**New Mailing Address:**

P O BOX 1987  
YULEE, FL 32041 US

FEI Number: 51-0488867

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PROPERTY MANAGEMENT SYSTEMS INC  
463499 STATE ROAD 200  
YULEE, FL 32097 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: PD ( ) Delete  
Name: DONNELLY, KEITH  
Address: 11945 SAN JOSE BLVD. BLDG. 300  
City-St-Zip: JACKSONVILLE, FL 32223

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BORNER, THOMAS  
Address: 3261 SILVERADO CIRCLE  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VPD ( ) Change (X) Addition  
Name: CALLAHAN, SHIRA L  
Address: 3220 SILVERADO CIRCLE  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: STD ( ) Change (X) Addition  
Name: CURTIS, LORETTA P  
Address: 2711 CREEK RIDGE CIRCLE  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TERRELL J POWELL

RA

12/09/2008

Electronic Signature of Signing Officer or Director

Date