

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N33662

1. Entity Name

BLACKBERRY CREEK HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business

2180 WEST SR 434
5000
LONGWOOD FL 32779
US

Mailing Address

2180 WEST SR 434
5000
LONGWOOD FL 32779
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3074152

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HART, JAMES W JR
SENTRY MANAGEMENT, INC.
2180 WEST SR 434 #5000
LONGWOOD FL 32779

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE DST
NAME WERRELL, DAVE
STREET ADDRESS 84 BLACKBERRY CREEK DR.
CITY-ST-ZIP ST. CLOUD FL 34769 ☐ Delete

TITLE D
NAME SHROCK, THEADOR
STREET ADDRESS 8809 BLACKBERRY CIR
CITY-ST-ZIP SAINT CLOUD FL 34769 ☐ Delete

TITLE DVP
NAME AULET, JOE
STREET ADDRESS 65 BLACKBERRY CREEK DR
CITY-ST-ZIP ST. CLOUD FL 34769 ☒ Delete

TITLE ST
NAME PICKENS, JOHN
STREET ADDRESS 3853 BLACKBERRY CIR
CITY-ST-ZIP SAINT CLOUD FL 34769 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME SCHROCK, THEADOR
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE VPD
NAME PARRAS, FRANK
STREET ADDRESS 3833 Blackberry Circle
CITY-ST-ZIP St. Cloud, FL 34769 ☐ Change ☒ Addition

TITLE STD
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Dave Werrell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)