

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009354

FILED
Feb 24, 2014
Secretary of State
CC2544102813

Entity Name: WOLF CREEK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13364 BEACH BLVD.
ASSOCIATION MANAGER'S OFFICE
JACKSONVILLE, FL 32224

Current Mailing Address:

13364 BEACH BLVD.
ASSOCIATION MANAGER'S OFFICE
JACKSONVILLE, FL 32224

FEI Number: 59-3817461

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABNER, BRETT
6816 SOUTHPOINT PKWY
SUITE 400
JACKSONVILLE, FL 32216 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name HUGHES, ROBERT
Address 13364 BEACH BLVD. MANAGER'S OFFICE
City-State-Zip: JACKSONVILLE FL 32224

Title DIR
Name MAGARRIGLE, HANK
Address 13364 BEACH BLVD. MANAGER'S OFFICE
City-State-Zip: JACKSONVILLE FL 32224

Title VP
Name CORNELL, BONNIE
Address 13364 BEACH BLVD. MANAGER'S OFFICE
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR
Name MORRIS, FRED
Address 13364 BEACH BLVD. MANAGER'S OFFICE
City-State-Zip: JACKSONVILLE FL 32224

Title TREASURER
Name TYNDALL, GLENN
Address 13364 BEACH BLVD. MANAGER'S OFFICE
City-State-Zip: JACKSONVILLE FL 32224

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: ROBERT HUGHES

PRESIDENT

02/24/2014

Electronic Signature of Signing Officer/Director Detail

Date