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.

PRESIDENT

SIGNATURE: BENJAMIN PEARCE

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of 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:

Officer/Director Detail :				
	Title	DP	Title	DS
	Name	PEARCE, BENJAMIN N	Name	WRIGHT, LAURA B
	Address	551 MOONEY RD	Address	110 PERRY AVE
	City-State-Zip:	FORT WALTON BEACH FL 32547	City-State-Zip:	FORT WALTON BEACH FL 32548
	Title	D	Title	DV
	Name	COLE, ROBERT	Name	WILCOX, CYNTHIA
	Address	200 WILLING ST	Address	110 PERRY AVE SE
	Address City-State-Zip:	200 WILLING ST MILTON FL 32570		110 PERRY AVE SE FORT WALTON BEACH FL 32548

Name and Address of Current Registered Agent:

KENT, MICHAEL G 205 BROOKS STREET STE 201 FT WALTON BEACH, FL 32548 US

Current Principal Place of Business:

DOCUMENT# N48575

110 PERRY AVE SE FT WALTON BEACH, FL 32548

Current Mailing Address:

205 BROOKS ST STE 201 FORT WALTON BEACH. FL 32548 US

FEI Number: 59-3221444

Entity Name: BLACKWATER HOUSING CORPORATION

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Certificate of Status Desired: No

FILED Apr 20, 2015 Secretary of State CC8167868211

> 04/20/2015 Date

Date