

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000004771

**FILED  
Jan 18, 2018  
Secretary of State  
CC1393510043**

**Entity Name:** CREEKSIDE OAKS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

4400 BAYOU BLVD  
STE 58B  
PENSACOLA, FL 32503

**Current Mailing Address:**

4400 BAYOU BLVD  
STE 58B  
PENSACOLA, FL 32503

**FEI Number: 63-0635103**

**Certificate of Status Desired: No**

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

REALTY MASTER OF FL  
4400 BAYOU BLVD  
STE 58B  
PENSACOLA, FL 32503 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 SECRETARY/TREASURER  
Name COON, KATHY  
Address 2049 PIN HIGH DRIVE  
City-State-Zip: PENSACOLA FL 32526

Title PRESIDENT  
Name ZACKO, MICHAEL  
Address 2364 CADDY SHACK LANE  
City-State-Zip: PENSACOLA FL 32526

Title DIRECTOR  
Name PAPRA, JAN  
Address 2008 PIN HIGH DRIVE  
City-State-Zip: PENSACOLA FL 32526

Title DIRECTOR  
Name GOODWIN, TERRY  
Address 2012 PIN HIGH DRIVE  
City-State-Zip: PENSACOLA FL 32526

Title DIRECTOR  
Name MCCLURE, EMORY LANCE  
Address 2065 PIN HIGH DRIVE  
City-State-Zip: PENSACOLA FL 32526

Title VP  
Name WATKINS, WILLIAM  
Address 2052 PIN HIGH DRIVE  
City-State-Zip: PENSACOLA FL 32526

Title DIRECTOR  
Name MCDONALD, DAWN  
Address 2337 CADDY SHACK LANE  
City-State-Zip: PENSACOLA FL 32526

Title DIRECTOR  
Name WOLF, JODY  
Address 2205 VALLE ESCONDIDO -  
City-State-Zip: PENSACOLA FL 32526

**Continues on page 2**

*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: JAY SCHWARTZ**

**MANAGER**

**01/18/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           FREGEAU, BRANDON  
Address        2349 CADDY SHACK LANE  
City-State-Zip: PENSACOLA FL 32526

Title           MANAGER  
Name           SCHWARTZ, JAY  
Address        4400 BAYOU BLVD.  
                  SUITE 58B  
City-State-Zip: PENSACOLA FL 32503