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Jul 01 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **728671** (9)
1. Corporation Name
BUCKHORN CREEK, INC.



Principal Place of Business P.O. BOX 60 BRANDON FL 33511 US	Mailing Address P.O. BOX 60 BRANDON FL 33509-0060 US
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3. Date Incorporated or Qualified 01/30/1974	3a. Date of Last Report 03/13/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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4. FEI Number 59-1672167	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent DURRANT, MARION L. 856 CREEKWAY COURT BRANDON FL 33511	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	D ☒ DELETE
NAME	CARP, JEFFREY
STREET ADDRESS	911 BUCK COURT
CITY-ST-ZIP	BRANDON FL
TITLE	DP ☐ DELETE
NAME	DURRANT, MARION L.
STREET ADDRESS	856 CREEKWAY COURT
CITY-ST-ZIP	BRANDON FL
TITLE	DVP ☐ DELETE
NAME	CALL, CAROL
STREET ADDRESS	9287 BUCK COURT
CITY-ST-ZIP	BRANDON FL
TITLE	D ☐ DELETE
NAME	FERNANDEZ, R.
STREET ADDRESS	3217 ELK CT.
CITY-ST-ZIP	BRANDON FL 33511
TITLE	DT ☒ DELETE
NAME	ROACH, CHARLENE L.
STREET ADDRESS	919 BUCK COURT
CITY-ST-ZIP	BRANDON FL
TITLE	DS ☐ DELETE
NAME	CHANDLER, MALCOLM
STREET ADDRESS	3207 ELK COURT
CITY-ST-ZIP	BRANDON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☒ Addition
1.2 NAME	D Glenn C. Thompson
1.3 STREET ADDRESS	926 Buck Court
1.4 CITY-ST-ZIP	Brandon FL 33511
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☒ Addition
5.2 NAME	D Barbara L. Smith
5.3 STREET ADDRESS	3115 Creekglenn Ct
5.4 CITY-ST-ZIP	Brandon FL 33511
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

CP2E037 (9/96)