

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739177

FILED  
Mar 20, 2011  
Secretary of State

**Entity Name:** BLACK HAMMOCK ISLAND CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

15770 SAWPIT RD  
JACKSONVILLE, FL 32226 US

**New Principal Place of Business:**

**Current Mailing Address:**

15561 FLOUNDER RD  
JACKSONVILLE, FL 32226 US

**New Mailing Address:**

**FEI Number:** 59-2104167

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMPSON, MARY E  
15561 FLOUNDER RD  
JACKSONVILLE, FL 32226 US

**Name and Address of New 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MILLIGAN, RONALD  
Address: 10210 SAWPIT RD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VP  
Name: LEE, CHARLES  
Address: 15930 SHARK RD W  
City-St-Zip: JACKSONVILLE, FL 32226

Title: T  
Name: CASWELL, ANN  
Address: 15648 SHARK RD. W  
City-St-Zip: JACKSONVILLE, FL 32226

Title: P  
Name: THOMPSON, MARY  
Address: 15561 FLOUNDER ROAD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: S  
Name: MILLIGAN, JANICE  
Address: 10210 SAWPIT RD  
City-St-Zip: JACKSONVILLE, FL 32226

Title: D  
Name: THOMPSON, JACK  
Address: 15561 FLOUNDER RD  
City-St-Zip: JACKSONVILLE, FL 32226

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: MARY THOMPSON

P

03/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date