

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752074

FILED  
Jan 17, 2012  
Secretary of State

**Entity Name:** BLACK CREEK TRAIL HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2225 TREASURE PT RD  
2225 TREASURE PT RD  
GREEN COVE SPRGS, FL 32043

**New Principal Place of Business:**

**Current Mailing Address:**

2225 TREASURE PT RD  
GREEN COVE SPRGS, FL 32043

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

RAY, THOMAS R ESQ  
2301 INDEPENDENT DRIVE  
JACKSONVILLE, FL 32202 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: PD  
Name: SMILEY, TERRY  
Address: 2225 TREASURE POINT RD  
City-St-Zip: GREEN COVE SPRGS, FL 32043

Title: DV  
Name: VINING, LAMAR  
Address: 2221 TREASURE POINT RD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: TD  
Name: STEFFEN, PETE  
Address: 2249 TREASURE POINT RD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: TERRY SMILEY

PD

01/17/2012

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

\_\_\_\_\_  
Date