## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 24, 2006 8:00 am Secretary of State

| DOCUMENT # 763278  1. Entity Name CREEK FOREST HOMEOWNERS ASSOCIATION, INC.   |  |   |   | 02   | 2-24-2006 9                                   | 00012 014 ****61.   | 25                                     |  |
|---|--|---|---|--|---|---|--|--|
| 1213 NW 39 AVE 26<br>GAINESVILLE, FL 32605 SUI  |  | Mailing Address 2622 N.W. 43RD STREET SUITE A-3 GAINESVILLE, FL 32606 |   |  |   | I BIRIN BIRIN BIRIN BIRIN BIRIN BIRIN                             | 111 <b>61 61 (11)</b>                  |  |
| 2. Principal Place of Business 3. Ma  |  | 3. Mailing Address  | I. Mailing Address  |  |   |   |  |  |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.   |   | 02222006 <sub>C</sub>  | hg-NP   | CR2E037 (11/05)   |  |  |
| City & State  |  | City & State  |   | 4. FEI Number 59-314814  | 18  | <del></del>   | oplied For<br>ot Applicable            |  |
| Zip<br>   | Country  | Zip   | Country   | 5. Certificate of St   |   | \$8.75 Add  |  |  |
| 6. Name and Address of Current Registered Agent   |  |   |   | 7. Name and Address of New Registered Agent                                  |   |   |  |  |
| ADAMS, HAWES N<br>2622 N.W. 43RD STREET   |  |   | Name<br>Street Ad   | Street Address (P.O. Box Number is Not Acceptable)                           |   |   |  |  |
| SUITE A-3<br>GAINESVI   | 3<br>ILLE, FL 32606  |   |   |  |   |   | •                                      |  |
|   |  |   | City  |  | ·   | FL Zip Code   | ө                                      |  |
| 8. The above the obligat  | named entity submits this statement fo<br>tions of registered agent.   | r the purpose of changing its re                                      | egistered office or r   | registered agent, or both, in  | the State of Flo                              | orida. I am familiar with,  | and accept                             |  |
| SIGNATURE   | Signature, typed or printed name of registered agent   | and title if applicable. (NOTE:                                       | Registered Agent signature  | e required when reinstating)   | <u> </u>                                      | DATE  |  |  |
| Filing Fee is \$61.25<br>Due by May 1, 2006   |  |   |   |  |   |   |  |  |
| 1   |  | 9. Election Camp<br>Trust Fund Co                                     |   | \$5.00 May Be<br>Added to Fees   |   | ake check payable to<br>ida Department of St                      |  |  |
| 10.   | Due by May 1, 2006 OFFICERS AND DIF  | Trust Fund Co   | ontribution.  | Added to Fees  ADDITIONS/CHANG   | Flor  |   | tate                                   |  |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP   | Due by May 1, 2006   | Trust Fund Co   | 11.   | Added to Fees  ADDITIONS/CHANG   | Flor<br>ES TO OFFICE                          | Ida Department of St  | tate                                   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | Due by May 1, 2006  OFFICERS AND DIF  VPD  BOYKIN, BILL  P.O. BOX 380076  JACKSONVILLE, FL 32205  PD  SNOEREN, MARGE   | Trust Fund Co   | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | Added to Fees  ADDITIONS/CHANG   | Flor<br>ES TO OFFICE                          | Ida Department of St  | 10                                     |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | Due by May 1, 2006  OFFICERS AND DIF  VPD  BOYKIN, BILL  P.O. BOX 380076  JACKSONVILLE, FL 32205  PD   | Trust Fund Co   | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | Added to Fees  ADDITIONS/CHANG   | Flor<br>ES TO OFFICE                          | ida Department of St RS AND DIRECTORS IN Change                   | 10 Addition                            |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | OFFICERS AND DIF  VPD  BOYKIN, BILL  P.O. BOX 380076  JACKSONVILLE, FL 32205  PD  SNOEREN, MARGE  1566 MOORINGS DR, APT 2B   | Trust Fund Co   | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | Added to Fees  ADDITIONS/CHANG   | Flor<br>ES TO OFFICE                          | ida Department of St RS AND DIRECTORS IN Change                   | 10 Addition                            |  |
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