

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H74388

FILED  
Jan 30, 2012  
Secretary of State

**Entity Name:** MAPLE CREEK PROPERTIES, INCORPORATED

**Current Principal Place of Business:**

9701 SUNNYOAK DRIVE  
RIVERVIEW, FL 33569 US

**New Principal Place of Business:**

**Current Mailing Address:**

9701 SUNNYOAK DRIVE  
RIVERVIEW, FL 33569 US

**New Mailing Address:**

**FEI Number:** 59-2577115

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMOLEK, GARY W.  
4010 LEWIS SPEEDWAY STE 299  
ST AUGUSTINE, FL 32095 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: DS  
Name: WILSON, MARGARET O.  
Address: 259 COURTYARDS BLVD., APT. 205  
City-St-Zip: SUN CITY CENTER, FL 33573

Title: DT  
Name: ECKHARDT, BEVERLY S.  
Address: 9701 SUNNYOAK DRIVE  
City-St-Zip: RIVERVIEW, FL

Title: DC  
Name: SMOLEK, MICHAEL A.  
Address: 47516 LUCAS COVE DR  
City-St-Zip: ST MARY'S, MD

Title: D  
Name: SMOLEK, GARY W.  
Address: 4 E PARK AVENUE  
City-St-Zip: ST. AUGUSTINE, FL

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BEVERLY S. ECKHARDT

DT

01/30/2012

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

\_\_\_\_\_  
Date