2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# N01000004900

Entity Name: BLACKBERRY FARMS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

POST OFFICE 7094
LAKE CITY, FL 32056

New Principal Place of Business:

Current Mailing Address:

PO BOX 7094
LAKE CITY, FL 32056

New Mailing Address:

FEI Number: 01-0630229 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARPER, BECKY
580 NW BLACKBERRY CIRCLE
LAKE CITY, FL 32055 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: PRES ( ) Delete
Name: HARPER, BECKY
Address: 580 NW BLACKBERRY CIRCLE
City-St-Zip: LAKE CITY, FL 32055

Title: VP ( ) Delete
Name: UMSTEAD, VICKIE
Address: 282 NW BLACKBERRY CIRCLE
City-St-Zip: LAKE CITY, FL 32055

Title: T ( ) Delete
Name: UMSTEAD, CHRIS
Address: 282 NW BLACKBERRY CIRCLE
City-St-Zip: LAKE CITY, FL 32055

Title: SECT ( ) Delete
Name: GROVES, BARRY
Address: 1214 NW BLACKBERRY CIRCLE
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: HOOPER, YVETTE
Address: 1140 NW BLACKBERRY CIRCLE
City-St-Zip: LAKE CITY, FL 32055

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SECT (X) Change ( ) Addition
Name: COLEMAN, KIM
Address: 640 NW BLACKBERRY CIRCLE
City-St-Zip: LAKE CITY, FL 32055

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BECKY HARPER PRES 04/18/2008

Electronic Signature of Signing Officer or Director — Date