2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008063

FILED Apr 27, 2009 Secretary of State

Entity Name: NORTH CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1403-3 DUNN AVE 1403-1 DUNN AVE

JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218

Current Mailing Address: New Mailing Address:

1403-3 DUNN AVE 1403-1 DUNN AVE

JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218

FEI Number: 59-3760349 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ERA DAN JONES & ASSOCIATES, INC.

1403-3 DUNN AVENUE

ERA DAN JONES & ASSOCIATES, INC.

1403-1 DUNN AVENUE

JACKSONVILLE, FL 32218 US JACKSONVILLE, FL 32218 US

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: SONJA INGRAM 04/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DP () Delete Title: DP (X) Change () Addition

 Name:
 CRANE, RALPH
 Name:
 DADDARIO, TOM

 Address:
 7700 SQUARE LAKE BLVD
 Address:
 7700 SQUARE LAKE BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32256
 City-St-Zip:
 JACKSONVILLE, FL 32256

Title: VSTD () Delete Title: ST (X) Change () Addition Name: JACKSON, WOLFE Name: ADAMS, DENISE

Address: 7700 SQUARE LAKE BLVD Address: 7700 SQUARE LAKE BLVD
City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE, FL 32256

Title: TR () Change (X) Addition

 Name:
 Name:
 WATTS, DAVID

 Address:
 Address:
 1403-1 DUNN AVENUE

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32218

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: SONJA INGRAM MGR 04/27/2009