

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000618

FILED  
Jul 02, 2009  
Secretary of State

Entity Name: BLACKWATER SADDLE CLUB, INC.

## Current Principal Place of Business:

9153 SINGLE TREE ROAD  
MILTON, FL 32583

## New Principal Place of Business:

## Current Mailing Address:

P.O.BOX 291  
MILTON, FL 32572

## New Mailing Address:

FEI Number: 59-3733010      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

RICHARDSON, WILLIAM  
9153 SINGLE TREE ROAD  
MILTON, FL 32583      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RICHARDSON, WILLIAM  
Address: 9153 SINGLE TREE ROAD  
City-St-Zip: MILTON, FL 32583

Title: VP ( ) Delete  
Name: PHILIPS, DAVID  
Address: 8816 RAY HELMS ROAD  
City-St-Zip: MILTON, FL 32583

Title: T ( ) Delete  
Name: HANCOCK, DAVID  
Address: 7999 BENEVA ROAD  
City-St-Zip: MILTON, FL 32583

Title: S ( ) Delete  
Name: ANDERSON, JENNIFER  
Address: 6750 TRAMMEL DRIVE  
City-St-Zip: MILTON, FL 32583

Title: D ( ) Delete  
Name: FRITTER, BILL  
Address: 1500 CLEAR SPRINGS ROAD  
City-St-Zip: LAUREL HILL, FL 32567

Title: D ( ) Delete  
Name: MORAN, JERRY  
Address: 6697 SHAGGY OAKS  
City-St-Zip: MILTON, FL 32583

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: TOUCHTON, CHRIS  
Address: 2750 LOOKOUT TRAIL  
City-St-Zip: PACE, FL 32571

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

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

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

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

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: WILLIAM RICHARDSON

P

07/02/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date