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Ps, 10/21/03

Black Creek Neighborhood Association P.O. Box 799 Freeport FL 32439

To preserve and protect our community as a residential neighborhood.

To preserve and protect our environmentally sensitive creek, bay and waterways

October 10, 2003

Amendment Section Division of Corporations P. O. Box 6327 Tallahassee FL 32314

> Ref: Black Creek Neighborhood Association N02000001046 — Incorporated Feb 12, 2002

The Black Creek Neighborhood Association has experienced changes in the office of Registered Agent, President and Treasurer. Therefore, we have newly elected individuals to fill these offices. Enclosed you will find Transmittal Letters with applicable amendment documents attached thereto. Attachments are as follows:

Atch 1	Transmittal Letter. Change of Registered Agent, President and Director from James Chatham to Ina Mae Fannin. (Filing Fee, \$35.00)
Atch 2	Transmittal Letter. Statement of Resignation, Registered Agent, Black Creek Neighborhood Association, James Chatham. (Filing Fee, \$87.50)
Atch 3	Transmittal Letter. Statement of Resignation, President/Director, Black Creek Neighborhood Association, James Chatham. (Filing Fee, \$35.00)
Atch 4	Transmittal Letter. Statement of Resignation, Treasurer/Director, Black Creek Neighborhood Association, Patricia (Patty) Freeman. (Filing Fee, \$35.00)
Atch 5	Amendment to include name of newly elected Treasurer, Ernestine Reyes.

A check in the amount of \$192.50 is included to cover the costs associated with the current changes of the Black Creek Neighborhood Association. Should you have any questions or require further information, please contact me at my home phone number which is (850) 835-1881.

Sincerely,

BETTY A PATTON

Corresponding/Recording Secretary

TRANSMITTAL LETTER

SUBJECT: BLACK NEIGH BORHOOD ASSOC, LINC
(Name of corporation)

DOCUMENT NUMBER: NO.20000 10 46

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

LINK MAR JANNIN. Publication
(Name of person)

Black Creek Mighborhood Cosoc, Inc.
(Name of firm/company)

P.O. Box 79 9

(Address)

JAMPORT FR. 32039
(City/state and zip code)

For further information concerning this matter, please call:

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

> Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

CR2E045(07/02)

State 1'

** STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to th	ne provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
this statement o	of change is submitted for a corporation organized under the laws of the State of
FLORID	in order to change its registered office or registered agent, or both, in the State
of Florida.	
1. The name of	the corporation: BLACK CREEK NEIBHBORHOOD ASSOCIATION. INC
2. The principa	al office address: RO. BOX 799
	FREEDORT FL 32839
3. The mailing	address (if different):
<u></u>	
4. Date of incom	rporation/qualification Lel 12, 2002 Document number: NO200001046
	and street address of the current registered agent and registered office on file with the
riorida Depa	TAMES CHATHAM, Registered agent/President/Durect
	16 E. FISHERMAN'S RUN
	FREEPORT FL 32439
6 The name a	and street address of the many resistance agent (if showns A and for resistance office (if
changed);	INA MAE FATHIN Registered Signat / President / Duren
	(P.O. Box or personal mailbox NOT acceptable)
	FREE PORT FL - 32439
The street addragent, as chang	ress of its registered office and the street address of the business office of its registered ged will be identical.
Such change wanthorized by t	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
(Signature of an office	Mac Farmer (Printed or typed name and little)
I further aoree	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete f my duties, and I am familiar with and accept the obligation of my position as int. Or, if this document is being filed merely to reflect a change in the registered I hereby confirm that the corporation has been notified in writing of this change.
The (Mae January Det 10, 2003 Signature of Registered Agent) (Date)
If signing on beha	If of an entity:
	(Typed or Printed Name) (Capacity)

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

Atch!2