

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000008892

FILED
Nov 26, 2008
Secretary of State

Entity Name: BLACKWATER HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

920 THIRD STREET, SUITE B
NEPTUNE BEACH, FL 32266

New Principal Place of Business:

Current Mailing Address:

920 THIRD STREET, SUITE B
NEPTUNE BEACH, FL 32266

New Mailing Address:

4003 HARTLEY RD.
JACKSONVILLE, FL 32257

FEI Number: 16-1712911 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

WALLACE, L. DENISE
920 THIRD STREET, SUITE B
NEPTUNE BEACH, FL 32266 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: L. DENISE WALLACE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MORGAN, THOMAS E
Address: 12477 BLACKWATER COURT
City-St-Zip: JACKSONVILLE, FL 32223

Title: TD () Delete
Name: BLOW, JEFFREY A
Address: 12440 BLACKWATER COURT
City-St-Zip: JACKSONVILLE, FL 32223

Title: SD () Delete
Name: BEYER, RICHARD W
Address: 12423 BLACKWATER COURT
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MYERS, DELLA T.

MGR

11/26/2008

Electronic Signature of Signing Officer or Director

Date