

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21680

**FILED**  
**Jun 17, 2010**  
**Secretary of State**

**Entity Name:** BEAR CREEK PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4180 ROSEWOOD AVENUE  
MALABAR, FL 329500962

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 500962  
MALABAR, FL 329500962

**New Mailing Address:**

**FEI Number:** 58-2836281

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REED, NICKOLAS  
4180 ROSEWOOD AVE  
MALABAR, FL 32950 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: D  
Name: GARVEY, RICH  
Address: 1740 FLAMEVINE PLACE  
City-St-Zip: VALKARIA, FL 32950

Title: TD  
Name: REED, NICKOLAS  
Address: 4180 ROSEWOOD AVE  
City-St-Zip: MALABAR, FL 32950

Title: D  
Name: MARTIN, ESTHER  
Address: 1731 FLAMEVINE PLACE  
City-St-Zip: MALABAR, FL 32950

Title: SD  
Name: MARSHALL, PAM  
Address: 4131 ROSEWOOD AVE  
City-St-Zip: VALKARIA, FL 32950

Title: PD  
Name: EPP, FRED  
Address: 4191 ROSEWOOD AVE  
City-St-Zip: MALABAR, FL 32950

Title: VD  
Name: WILACY, COLIN  
Address: 4171 ROSEWOOD AVENUE  
City-St-Zip: VALKARIA, FL 32950

I hereby 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 all other like empowered.

SIGNATURE: NICKOLAS G. REED

TD

06/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date