

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22553

FILED
May 01, 2011
Secretary of State

Entity Name: BLACK DIAMOND PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2600 W. BLACK DIAMOND CIRCLE
LECANTO, FL 34461 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 188
HOLDER, FL 344450188 US

New Mailing Address:

FEI Number: 59-3172015

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAUFF, JENNIFER
2600 W. BLACK DIAMOND CIRCLE
LECANTO, FL 34461 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: PD
Name: MCDONALD, DAVID
Address: 2600 W. BLACK DIAMOND CIRCLE
City-St-Zip: LECANTO, FL 34461

Title: VPD
Name: SILVA, ROBERT
Address: 2600 W. BLACK DIAMOND CIR
City-St-Zip: LECANTO, FL 34461

Title: TD
Name: SILVA, ELCIO
Address: 2600 W. BLACK DIAMOND CIR
City-St-Zip: LECANTO, FL 34461

Title: D
Name: BOWER, JOHN
Address: 2600 W. BLACK DIAMOND CIRCLE
City-St-Zip: LECANTO, FL 34461

Title: D
Name: BASKIN, BETTY
Address: 2600 W. BLACK DIAMOND CIRCLE
City-St-Zip: LECANTO, FL 34461

Title: D
Name: COLLICK, JOHN P
Address: 2600 W. BLACK DIAMOND CIRCLE
City-St-Zip: LECANTO, FL 34461

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: MCDONALD

PD

05/01/2011

Electronic Signature of Signing Officer or Director

Date