

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41682

FILED  
Jan 22, 2010  
Secretary of State

Entity Name: BLACKBERRY CREEK AND ST. CLOUD COMMERCE CENTER MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

101 PARK PLACE BLVD.  
SUITE 3  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

101 PARK PLACE BLVD.  
SUITE 3  
KISSIMMEE, FL 34741

**Current Mailing Address:**

**New Mailing Address:**

FEI Number: 59-3048853      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SCHOOLFIELD, WAYNE  
101 PARK PLACE BLVD SUITE 3  
KISSIMMEE, FL 34741 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: SCHOOLFIELD, WAYNE  
Address: 101 PARK PLACE BLVD SUITE 3  
City-St-Zip: KISSIMMEE, FL 34741

Title: VPD  
Name: SCHOOLFIELD, KEVIN  
Address: 101 PARK PLACE BLVD, SUITE 3  
City-St-Zip: KISSIMMEE, FL 34741

Title: STD  
Name: RASMUS, SHERAN  
Address: 101 PARK PLACE BLVD, SUITE 3  
City-St-Zip: KISSIMMEE, FL 34741

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: WAYNE SCHOOLFIELD

RA

01/22/2010

Electronic Signature of Signing Officer or Director

Date