

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47924

FILED  
Feb 12, 2009  
Secretary of State

**Entity Name:** SWEETWATER CREEK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

% SIGNATURE REALTY & MANAGEMENT  
4003 HARTLEY ROAD  
JACKSONVILLE, FL 32257 US

**New Principal Place of Business:**

**Current Mailing Address:**

% SIGNATURE REALTY & MANAGEMENT  
4003 HARTLEY ROAD  
JACKSONVILLE, FL 32257 US

**New Mailing Address:**

**FEI Number:** 59-3147702

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIGNATURE REALTY & MANAGEMENT, INC.  
% BRYAN CANTRELL  
4003 HARTLEY ROAD  
JACKSONVILLE, FL 32257 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: STD ( ) Delete  
Name: ANDREWS, FRANK  
Address: 5360 CHESTNUT LAKE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32258

Title: PD ( ) Delete  
Name: KELLY, MARY E  
Address: 11517 JOLIET FALLS LN  
City-St-Zip: JACKSONVILLE, FL 32258

Title: D ( ) Delete  
Name: LATIMER, BRUCE  
Address: 5502 HORSE STABLE LN  
City-St-Zip: JACKSONVILLE, FL 32258

**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: MARY E. KELLY

PD

02/12/2009

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

\_\_\_\_\_  
Date