

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50622

FILED
Mar 11, 2009
Secretary of State

Entity Name: BLUE'S CREEK MASTER OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7301 NW 50TH STREET
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

C/O ACTION REAL ESTATE SERVICES
6110 B NW 1 PL
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 59-3225368 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SAUSAMAN, JEFFREY D
B-6110 NW 1 PLACE
C/O ACTION REAL ESTATE SERVICES
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

ACTION REAL ESTATE SERVICES
6110-B NW 1ST PL
GAINESVILLE, FL 32607 US

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: D JEFFREY SAUSAMAN

03/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: HERRITAGE, MARJORIE
Address: 7088 NW 52ND TER
City-St-Zip: GAINESVILLE, FL 32653

Title: VD () Delete
Name: STAUDT, MICHAEL
Address: 5005 NW 76TH LANE
City-St-Zip: GAINESVILLE, FL

Title: D () Delete
Name: BROWN, WILLIAM
Address: 7822 NW 50 ST.
City-St-Zip: GAINESVILLE, FL 32653

Title: PD () Delete
Name: WILLIS, BILL
Address: 4710 NW 76 ROAD
City-St-Zip: GAINESVILLE, FL 32653

Title: D () Delete
Name: GRESHAM, TERRY
Address: 4738 NW 77TH RD
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PITTS, DONNA
Address: 7816 NW 51ST DR
City-St-Zip: GAINESVILLE, FL 32653

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: BILL WILLIS

P

03/11/2009

Electronic Signature of Signing Officer or Director

Date