

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50963

FILED  
Mar 09, 2010  
Secretary of State

**Entity Name:** EAGLE'S CREEK OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

BCM SERVICES, INC  
STE B  
NEPTUNE BEACH, FL 32266 US

**New Principal Place of Business:**

920 THIRD STREET  
STE B  
NEPTUNE BEACH, FL 32266 US

**Current Mailing Address:**

920 THIRD ST  
B  
NEPTUNE BEACH, FL 32266 US

**New Mailing Address:**

**FEI Number:** 59-3203215      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WALLACE, L. DENISE  
920 THIRD ST  
STE B  
NEPTUNE BEACH, FL 32266 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: SD  
Name: SPELLMAN, CHESTER  
Address: 1127 BLUE SKY WAY  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D  
Name: DICKINSON, BAMBI  
Address: 12467 ARROWLEAF LN.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: P  
Name: LOKIETEK, LUKE  
Address: 1085 WATERFALL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP  
Name: TAGGART, JASON  
Address: 12567 ARROWLEAF LANE  
City-St-Zip: JACKSONVILLE, FL 32225

Title: T  
Name: CARROLL, MATTHEW  
Address: 12535 BLUE EAGLE WAY  
City-St-Zip: JACKSONVILLE, FL 32225

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: L DENISE WALLACE

RA

03/09/2010

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

\_\_\_\_\_  
Date