

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000002288 (9)

1. Corporation Name

SOUTHCREEK HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**1728 SOUTHCREEK DR.
JACKSONVILLE FL 32259**

**1728 SOUTHCREEK DR.
JACKSONVILLE FL 32259**

3. Date Incorporated or Qualified
05/19/1993

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-3307885

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

24

25

Country

29

30

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RYAN, WILLIAM B JR.
3000-8 HARTLEY RD.
JACKSONVILLE FL 32257**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **P/D RODRIGUEZ, RANDY**
STREET ADDRESS **1833 AUTUMNBROOK LN.**
CITY-ST-ZIP **JACKSONVILLE FL 32259**

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **P/D Bob John**
1.3 STREET ADDRESS **1832 Autumnbrook Lane**
1.4 CITY-ST-ZIP **Jacksonville, FL 32259**

TITLE ☐ DELETE
NAME **VP/D PALLONE, JANETLEE**
STREET ADDRESS **1725 SOUTHCREEK DR.**
CITY-ST-ZIP **JACKSONVILLE FL 32259**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **VP/D Jenny Bennett**
2.3 STREET ADDRESS **1724 Southcreek Drive**
2.4 CITY-ST-ZIP **Jacksonville, FL 32259**

TITLE ☐ DELETE
NAME **S/D LOCKAMY, MARY**
STREET ADDRESS **1813 AUTUMNBROOK LN.**
CITY-ST-ZIP **JACKSONVILLE FL 32259**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **S/D Nancy Beaudry**
3.3 STREET ADDRESS **1728 Southcreek Drive**
3.4 CITY-ST-ZIP **Jacksonville, FL 32259**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **T/D Greg S Meyer**
4.3 STREET ADDRESS **1726 Southcreek Drive**
4.4 CITY-ST-ZIP **Jacksonville, FL 32259**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Gregory S. Meyer
Gregory S. Meyer

2/13/96

Date

Daytime Phone #

CR2E037 (12/95)