

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000075230

Entity Name: BLACK CREEK CAFE, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

2696 BLANDING BLVD
MIDDLEBURG, FL 32068

New Principal Place of Business:

2696 BLANDING BLVD
2696 BLANDING BLVD
MIDDLEBURG, FL 32068

Current Mailing Address:

242 EDGEWATER BRANCH DR
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 54-3668257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLAIEN, ELIZABETH A
242 EDGEWATER BRANCH
JACKSONVILLE, FL 32259 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PLAIE, ELIZABETH
Address: 242 EDGEWATER BRANCH DR
City-St-Zip: JACKSONVILLE, FL 32259

Title: SD () Delete
Name: PLAIE, JOHNATHAN J
Address: 242 EDGEWATER BRANCH DR
City-St-Zip: JACKSONVILLE, FL 32259

Title: VP () Delete
Name: PLAIE, JASON
Address: 242 EDGEWATER BRANCH DR
City-St-Zip: JACKSONVILLE, FL 32259

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH PLAIE

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date