#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 758656** 

Entity Name: BUCK LAKE WOODS PROPERTY OWNERS ASSOCIATION, INC.

**FILED** Apr 03, 2015 **Secretary of State** CC8330347436

# **Current Principal Place of Business:**

1400 CANADIAN GEESE TRAIL TALLAHASSEE, FL 32317

# **Current Mailing Address:**

P.O. BOX 15845

TALLAHASSEE. FL 32317 US

FEI Number: 72-0100121 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

SORNE, ANNETTE C 1400 CANADIAN GEESE TRAIL TALLAHASSEE, FL 32317 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title Title S

SHANAGHAN, BARBARA SCIARA, JAMES L Name Name 1530 CANADIAN GEESE TRAIL 1586 YEARLING TRAIL Address Address City-State-Zip: TALLAHASSEE FL 32317 TALLAHASSEE FL 32317 City-State-Zip:

Title Т Title PD

Name GRIFFITH, HAROLD SORNE, ANNETTE C Name Address 1154 ANTLER DRIVE Address 1400 CANADIAN GEESE TRAIL TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip:

ALTERNATE Title Title

Name WELSH, DANIEL Name UZZELL. DONNA

Address 1245 YEARLING TRAIL 1591 CANADIAN GEESE TRAIL Address City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

Title **ALTERNATE** 

FRAZIER, MIKE Name 1435 YEARLING TRAIL Address TALLAHASSEE FL 32317

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.

04/03/2015 SIGNATURE: ANNETTE C SORNE **PRESIDENT**