## 2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30701

Entity Name: BLACK CREEK INTEGRATED SYSTEMS CORP.

**Current Principal Place of Business:** 

2900 CRESTWOOD BLVD. IRONDALE, AL 35210

## **Current Mailing Address:**

P.O. BOX 101747

IRONDALE. AL 35210 US

FEI Number: 63-0998454 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Electronic Signature of Registered Agent

Date

**FILED** Apr 24, 2024

**Secretary of State** 

5784740013CC

## Officer/Director Detail:

Title	PRESIDENT, DIRECTOR, CEO	Title	TREASURER, VP
Name	NEWTON, ISAAC E III	Name	HILL, CONNIE
Address	P.O. BOX 101747	Address	P.O. BOX 101747
City-State-Zip:	IRONDALE AL 35210	City-State-Zip:	IRONDALE AL 35210

Title CHAIRMAN, DIRECTOR Title EVP, DIRECTOR HUGHES, BRADY W Name MULLINS, GINY E Name

Address P.O. BOX 101747 Address P.O. BOX 101747

IRONDALE AL 35210 City-State-Zip: IRONDALE AL 35210 City-State-Zip:

DIRECTOR Title Title DIRECTOR, SECRETARY Name KREIE, PAUL PIPER, JEFFREY S Name Address P.O. BOX 101747 P.O. BOX 101747 Address City-State-Zip: IRONDALE AL 35210 City-State-Zip: IRONDALE AL 35210

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

04/24/2024 SIGNATURE: CONNIE HILL **VP**