

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 754660

**FILED**  
**Jan 17, 2010**  
**Secretary of State**

**Entity Name:** CASSEL CREEK PROPERTY OWNERS' ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

2599 DERBYSHIRE CIRCLE  
CASSELBERRY, FL 327075650 US

**New Principal Place of Business:**

**Current Mailing Address:**

2599 DERBYSHIRE CIRCLE  
CASSELBERRY, FL 327075650 US

**New Mailing Address:**

**FEI Number:** 20-3006884

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRUMBAUGH, JANET  
2545 DERBYSHIRE CIRC  
CASSELBERRY, FL 32707 US

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

VAZQUEZ, MARITZA E  
2561 DERBYSHIRE CIRC  
CASSELBERRY, FL 32707 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: MARITZA E. VAZQUEZ

01/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: VAZQUEZ, MARITZA E  
Address: 2561 DERBYSHIRE CIR  
City-St-Zip: CASSELBERRY, FL 32707

Title: VD  
Name: RAHAL, GUS  
Address: 4709 FOX ST  
City-St-Zip: ORLANDO, FL 32814

Title: STD  
Name: BRUMBAUGH, JANET  
Address: 2545 DERBYSHIRE CIRCLE  
City-St-Zip: CASSELBERRY, FL 32707

Title: D  
Name: BOWLIN, CONNIE  
Address: 2585 DERBYSHIRE CIRCLE  
City-St-Zip: CASSELBERRY, FL 32707

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: MARITZA E. VAZQUEZ

PD

01/17/2010

Electronic Signature of Signing Officer or Director

Date