

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000538

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: LITTLE CREEK HOMEOWNERS' ASSOCIATION OF OSCEOLA COUNTY, INC.

**Current Principal Place of Business:**

8403 SOUTH PARK AVE.  
#670  
ORLANDO, FL 32819

**New Principal Place of Business:**

6972 LAKE GLORIA BLVD.  
ORLANDO, FL 32809 US

**Current Mailing Address:**

C/O LELAND MANAGEMENT  
5955 T.G. LEE BLVD SUITE 300  
ORLANDO, FL 32809

**New Mailing Address:**

6972 LAKE GLORIA BLVD.  
ORLANDO, FL 32809 US

FEI Number: 20-1131798

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FURLOW, REBECCA  
5955 T.G. LEE BLVD  
SUITE 300  
ORLANDO, FL 32809 US

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

FURLOW, REBECCA  
6972 LAKE GLORIA BLVD.  
ORLANDO, FL 32809 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:

04/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CORTEZ, CARLOS  
Address: 4554 ROSS LANIER LANE  
City-St-Zip: KISSIMMEE, FL 34758

Title: VP/T ( ) Delete  
Name: LAPAGLIA, JEREMY  
Address: 4684 ROSS LANIER LANE  
City-St-Zip: KISSIMMEE, FL 34758

Title: S ( ) Delete  
Name: BERRIOS COLON, ESTEBAN  
Address: 1984 KIMLYN CIRCLE  
City-St-Zip: KISSIMMEE, FL 34758

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: CORTEZ, CARLOS  
Address: 4554 ROSS LANIER LANE  
City-St-Zip: KISSIMMEE, FL 34758

Title: DV (X) Change ( ) Addition  
Name: LAPAGLIA, JEREMY  
Address: 4684 ROSS LANIER LANE  
City-St-Zip: KISSIMMEE, FL 34758

Title: DS (X) Change ( ) Addition  
Name: BERRIOS COLON, ESTEBAN  
Address: 1984 KIMLYN CIRCLE  
City-St-Zip: KISSIMMEE, FL 34758

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

SIGNATURE: CARLOS CORTEZ

DP

04/15/2009

Electronic Signature of Signing Officer or Director

Date