

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 02, 2007
Secretary of State**

DOCUMENT# N05000002224

Entity Name: CREEKSIDE COMMUNITY ASSOCIATION, INC. OF CHARLOTTE COUNTY

Current Principal Place of Business:

11691 GATEWAY BOULEVARD
SUITE 203
FORT MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

11691 GATEWAY BOULEVARD
SUITE 203
FORT MYERS, FL 33913

New Mailing Address:

FEI Number: 83-0425080 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WOLFE, PHILLIP
4470 FOWLER STREET
FORT MYERS, FL 33901 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SANDS, JEFF
Address: 4470 FOWLER STREET
City-St-Zip: FORT MYERS, FL 33901

Title: DP (X) Change () Addition
Name: WANZECK, MATT
Address: 4470 FOWLER STREET
City-St-Zip: FORT MYERS, FL 33901

Title: DVP () Delete
Name: WANZECK, MATT
Address: 4470 FOWLER STREET
City-St-Zip: FORT MYERS, FL 33901

Title: DVP (X) Change () Addition
Name: FUGLEBERG, WILLIAM
Address: 4470 FOWLER STREET
City-St-Zip: FORT MYERS, FL 33901

Title: DST () Delete
Name: NOAH, RYAN
Address: 4470 FOWLER STREET
City-St-Zip: FORT MYERS, FL 33901

Title: DST (X) Change () Addition
Name: EDWARDS, DAN
Address: 4470 FOWLER STREET
City-St-Zip: FORT MYERS, FL 33901

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: MATT WANZECK

PD

05/02/2007

Electronic Signature of Signing Officer or Director

_____ Date