## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2007 8:00 am Secretary of State

D.O.O.					,			
1. Entity Nan	MENT # N0600000 P CREEK HOMEOWNERS				90420 040 ****	<sup>6</sup> 1.25		
4500 PGA B	e of Business OULEVARD, SUITE 400 1 GARDENS, FL 33418	Mailing Address 4500 PGA BOULEVARD PALM BEACH GARDENS			_	11## 11## U## U## U## U## U## U## U## U#	II 88511 89189 16611 18618 1818	n kamal ri III
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			02082007 C	hg-NP	CR2E037 (12/06	i)
City & Stat	re	City & State			4. FEI Number 51 - 05	72921	<b>—</b>	Applied For Not Applicable
Zip	Country	Zip	Country		5. Certificate of S		□ \$8.75 A	Additional
	6. Name and Address of Current	Registered Agent			7. Name and Add	dress of New R	<u>:</u> .	
OLINOED.	IOUN		Name	100	C.			
OLINGER, JOHN 4500 PGA BOULEVARD, SUITE 400 PALM BEACH GARDENS, FL 33418				Address (P.O. Box Number is Not Acceptable) 4500 PGA Blud Ste 400				
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			<u></u>	> colm	Beach	Garde	<u>√s                                    </u>	3418
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	registered office of	r registered	d agent, or both, in	the State of Flo	rida. I am familiar wit	h, and accept
<b>-</b>							hulo	
SIGNATURE .						/	14/0/	
	Signature, typed or printed name of redistered agent	and title if applicable. (NOTE	E: Registered Agent signati	ture required w	then reinstating)	•	DÅTE	
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Care Trust Fund C	npaign Financing Contribution.		5.00 May Be Added to Fees		ake check payable da Department of	
10.	OFFICERS AND DI	RECTORS	11.	ΑC			RS AND DIRECTORS	IN 10
TITLE	DP	Delete	TITLE	Presi	dent / Div		☐ Change	Addition
TITLE NAME STREET ADDRESS	GREENE, RICHARD E		TITLE NAME STREET ADDRESS	Presi	es Gome	وح		e 🔀 Addition
NAME	= '	: 400	NAME	Presi	es Gome O PGA B	وح	- · • 400_	33418
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NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	GREENE, RICHARD E 4500 PGA BOULEVARD, SUITE PALM BEACH GARDENS, FL 3 DVP KOON, DAVID A 4500 PGA BOULEVARD, SUITE	2 400 3418	NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	James 450	es Gome O PGA B	وح	400 dens F2	33418
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