

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 04, 2005
Secretary of State**

DOCUMENT# N19193

Entity Name: COUNTRY CLUB VILLAGE II OF CROSS CREEK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST STATE ROAD 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST STATE ROAD 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 59-2803361 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 WEST STATE ROAD 434, SUITE 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: SWEENEY, JOHN
Address: 13070 CROSS CREEK CT #502
City-St-Zip: FT MYERS, FL 33912

Title: VPD () Delete
Name: THOMAS, PETE
Address: 13076 CROSS CREEK CT. #406
City-St-Zip: FORT MYERS, FL 33912

Title: STD () Delete
Name: COLLESI, ALBERT
Address: 1386 SOUTH DANBURY LN
City-St-Zip: DES PLAINES, IL 60018

Title: D () Delete
Name: WEBER, ROBERT
Address: 13070-501 CROSS CREEK CT
City-St-Zip: FT. MYERS, FL 33912

Title: D () Delete
Name: CAMPANELLA, RICO
Address: 13080 CROSS CREEK CT. #313
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HUTZEL, MARK
Address: 13070 CROSS CREEK CT #313
City-St-Zip: FORT MYERS, FL 33912

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN SWEENEY

PD

04/04/2005

Electronic Signature of Signing Officer or Director

Date