

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19194

FILED
Apr 06, 2004
Secretary of State**Entity Name:** CROSS CREEK OF FORT MYERS CONDOMINIUM II ASSOCIATION, INC.**Current Principal Place of Business:**2180 W SR 434
SUITE 5000
LONGWOOD, FL 327795044 US**New Principal Place of Business:****Current Mailing Address:**2180 W SR 434
SUITE 5000
LONGWOOD, FL 327795044 US**New Mailing Address:****FEI Number:** 65-0104915**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: CURTIS, LINDA
Address: 13001 CROSS CREEK #13
City-St-Zip: FT MYERS, FL 33912**Title:** STD () Delete
Name: BIANCHI, MARY ANN
Address: 13001 CROSS CREEK #28
City-St-Zip: FT MYERS, FL 33912**Title:** VD () Delete
Name: TOTTE, ELWOOD
Address: 13001 CROSS CREEK BLVD., #14
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:** VPD (X) Change () Addition
Name: TOTTE, ELWOOD
Address: 16137 LOCHERBIE
City-St-Zip: BEVERLY HILLS, MI 48025

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: LINDA CURTIS

PD

04/06/2004

Electronic Signature of Signing Officer or Director

Date