

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N24989

1. Entity Name

CROSS CREEK OF FORT MYERS CONDOMINIUM IV ASSOCIA

Principal Place of Business

6371-2 ARC WAY
FORT MYERS FL 33912
US

Mailing Address

PO BOX 61358
FT. MYERS FL 33906-1358

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0104929

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WORKMAN, DAVID J
PARAGON PROPERTY MANAGEMENT
6371-2 ARC WAY
FORT MYERS FL 33912

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME GREENSLADE, STANLEY
STREET ADDRESS 13021 CROSS CREEK BLVD 38
CITY-ST-ZIP FORT MYERS FL 33912

TITLE VP/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Delete
NAME FOSTER, VIRGIL
STREET ADDRESS 13021 CROSS CREEK BLVD 31
CITY-ST-ZIP FT MYERS FL

TITLE D ☐ Change ☒ Addition
NAME Durham, Norman
STREET ADDRESS 13021 Cross Creek Blvd #32
CITY-ST-ZIP Ft Myers, FL 33912

TITLE VPD ☐ Delete
NAME ZANNINI, BENITO
STREET ADDRESS 13021 CROSS CREEK BLVD #59
CITY-ST-ZIP FT MYERS FL

TITLE P/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE STD ☐ Delete
NAME CALAS, ROBERT
STREET ADDRESS 13021 CROSS CREEK BLVD #33
CITY-ST-ZIP FT. MYERS FL 33912

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME ALLEN, RICHARD A
STREET ADDRESS 13021 CROSS CREEK BLVD., #43
CITY-ST-ZIP FT. MYERS FL 33912

TITLE D ☐ Change ☒ Addition
NAME Meaker, Robert
STREET ADDRESS 13091 Cross Creek Blvd #35
CITY-ST-ZIP Ft Myers, FL 33912

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)