

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000003094

**FILED**  
**Feb 01, 2010**  
**Secretary of State**

**Entity Name:** CROSS CREEK OF OCOEE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

13350 WEST COLONIAL DRIVE  
SUITE 330  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 783367  
WINTER GARDEN, FL 34778 US

**New Mailing Address:**

**FEI Number:** 58-2069501

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOLOMON, SPENCER  
13350 WEST COLONIAL DRIVE  
SUITE 330  
WINTER GARDEN, FL 34787 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:** VPD  
**Name:** GRAMAGLIA, VINCENT  
**Address:** 501 BRIDGE CREEK BLVD  
**City-St-Zip:** OCOEE, FL 34761

**Title:** PD  
**Name:** COE, DAVID  
**Address:** 504 DARKWOOD AVE  
**City-St-Zip:** OCOEE, FL 34761

**Title:** STD  
**Name:** WOLFE, PAULINE  
**Address:** 2439 QUIET WATERS LOOP  
**City-St-Zip:** OCOEE, FL 34761

I hereby 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 all other like empowered.

**SIGNATURE:** SPENCER SOLOMON

RA

02/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date