

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732433

**FILED**  
**Mar 26, 2014**  
**Secretary of State**  
**CC1082329590**

**Entity Name:** PRAIRIE CREEK PARK PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

15651 PRAIRIE CREEK BLVD  
PUNTA GORDA, FL 33982

**Current Mailing Address:**

C/O STAR HOSPITALITY MANAGEMENT, INC.  
26530 MALLARD WAY  
PUNTA GORDA, FL 33950

**FEI Number:** 59-2325604

**Certificate of Status Desired:** No

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

STAR HOSPITALITY MANAGEMENT  
26530 MALLARD WAY  
PUNTA GORDA, FL 33950 US

*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:** SHERRY DANKO

03/26/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name ONOFRI, WAYNE  
Address C/O STAR HOSPITALITY MANAGEMENT, INC.  
26530 MALLARD WAY  
City-State-Zip: PUNTA GORDA FL 33950

Title VP, T  
Name CLARK, JEFF  
Address C/O STAR HOSPITALITY MANAGEMENT, INC.  
26530 MALLARD WAY  
City-State-Zip: PUNTA GORDA FL 33950

Title D  
Name GATES, LELAND JR.  
Address C/O STAR HOSPITALITY MANAGEMENT, INC.  
26530 MALLARD WAY  
City-State-Zip: PUNTA GORDA FL 33950

Title S  
Name BORREGO, KAREN  
Address C/O STAR HOSPITALITY MANAGEMENT, INC.  
26530 MALLARD WAY  
City-State-Zip: PUNTA GORDA FL 33950

Title D  
Name COX, LOREN  
Address C/O STAR HOSPITALITY MANAGEMENT, INC.  
26530 MALLARD WAY  
City-State-Zip: PUNTA GORDA FL 33950

Title D  
Name HOPPER, CHARLES  
Address C/O STAR HOSPITALITY MANAGEMENT, INC.  
26530 MALLARD WAY  
City-State-Zip: PUNTA GORDA FL 33950

Title D  
Name TURNER, WILLIAM  
Address C/O STAR HOSPITALITY MANAGEMENT, INC.  
26530 MALLARD WAY  
City-State-Zip: PUNTA GORDA FL 33950

*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:** WAYNE ONOFRI

**PRESIDENT**

03/26/2014

Electronic Signature of Signing Officer/Director Detail

Date