

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N0100002228

**Entity Name:** OSPREY VILLAGE AT CEDAR CREEK, INC.

**Current Principal Place of Business:**

4350 TIMOTHY DRIVE  
MERRITT ISLAND, FL 32953

**Current Mailing Address:**

4350 TIMOTHY DRIVE  
MERRITT ISLAND, FL 32953

**FEI Number: 51-0425535**

**Certificate of Status Desired: No**

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

BECKER & POLIAKOFF  
111 N. ORANGE AVE.  
SUITE 1400  
ORLANDO, FL 32801 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name WILLIAMS, GAIL  
Address 4350 TIMOTHY DRIVE  
City-State-Zip: MERRITT ISLAND FL 32953

Title VPD  
Name DILIBERTO, JOE  
Address 4350 TIMOTHY DRIVE  
City-State-Zip: MERRITT ISLAND FL 32953

Title VS  
Name FRATTAROLI, SAM  
Address 4350 TIMOTHY DRIVE  
City-State-Zip: MERRITT ISLAND FL 32953

Title VPD  
Name SINCLAIR, IAN  
Address 4350 TIMOTHY DRIVE  
City-State-Zip: MERRITT ISLAND FL 32953

Title DT  
Name SEYMOUR, WANDA  
Address 4350 TIMOTHY DRIVE  
City-State-Zip: MERRITT ISLAND FL 32953

*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: GAIL WILLIAMS**

**PRESIDENT**

**04/08/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date