

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005025

Entity Name: CEDAR CREEK RANCH ASSOCIATION, INC.**Current Principal Place of Business:**4050 DANIELLA DR
GREENACRES, FL 33467**Current Mailing Address:**C/O CMC MANAGEMENT
2950 JOG ROAD
GREENACRES, FL 33467 US**FEI Number:** 20-0493372**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVE., SOUTH,
SUITE 400
WEST PALM BEACH, FL 33409 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	MYERS, BRADY
Address	4187 CEDAR CREEK RANCH CIRCLE
City-State-Zip:	LAKE WORTH FL 33467

Title	VP
Name	HRISTOV, LAURE
Address	4168 CEDAR CREEK RANCH CIRCLE
City-State-Zip:	LAKE WORTH FL 33467

Title	SECRETARY
Name	STEARNS, MICHELLE
Address	4229 CEDAR CREEK RANCH CIRCLE
City-State-Zip:	LAKE WORTH FL 33467

Title	DIRECTOR
Name	ZEITZ, PATRICK
Address	4193 CEDAR CREEK RANCH CIRCLE
City-State-Zip:	LAKE WORTH FL 33467

Title	TREASURER
Name	COEPPICUS, GERRY
Address	4138 CEDAR CREEK RANCH CIR
City-State-Zip:	LAKE WORTH FL 33467

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: BRADY MYERS**PRESIDENT****04/21/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date