2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003147

Entity Name: ASBEL CREEK ASSOCIATION, INC.

FILED Jun 28, 2018 **Secretary of State** CC8916719342

Current Principal Place of Business:

C/O WISE PROPERTY MANAGEMENT, INC. 18550 N. DALE MABRY HWY

LUTZ, FL 33548

Current Mailing Address:

18550 N. DALE MABRY HIGHWAY LUTZ, FL 33548 US

FEI Number: 75-3174265 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GLAUSIER, CHARLES EVANS 400 N. ASHLEY DR., STE. 2020 TAMPA, FL 33602 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:

PRESIDENT VΡ Title Title

Name ROSALES, LOUIS Name LERNER, AUDREE

Address 18550 N. DALE MABRY HIGHWAY Address 18550 N. DALE MABRY HIGHWAY

LUTZ FL 33548 City-State-Zip: City-State-Zip: LUTZ FL 33548

Title **TREASURER** Title **SECRETARY** Name MCKENZIE. TY Name CRUZ, SHONDA

Address 18550 N. DALE MABRY HIGHWAY Address 18550 N. DALE MABRY HIGHWAY

City-State-Zip: LUTZ FL 33548 City-State-Zip: LUTZ FL 33548

Title **DIRECTOR**

Name JOHNSTON, LORI

Address 18550 N. DALE MABRY HIGHWAY

City-State-Zip: LUTZ FL 33548

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: LOUIS ROSALES Electronic Signature of Signing Officer/Director Detail

06/28/2018 **PRESIDENT**

Date