

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007454

FILED
Mar 04, 2016
Secretary of State
CC4882534001

Entity Name: CREATIVE CITY COLLABORATIVE, INC.

Current Principal Place of Business:

180 NE 1ST STREET
DELRAY BCH, FL 33444

Current Mailing Address:

180 NE 1ST STREET
DELRAY BCH, FL 33444

FEI Number: 26-3210202

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

USHE, ALYONA A
180 NE 1ST STREET
DELRAY BCH, FL 33444 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 CHAIRMAN
Name ROSEN, BRIAN
Address 5900 NORTH ANDREWS AVENUE,
SUITE 100
City-State-Zip: FT. LAUDERDALE FL 33309

Title BOARD MEMBER
Name DUNAYER , RONNIE
Address 2916 SW 22 CIRCLE
SUITE 20C1
City-State-Zip: DELRAY BEACH FL 33445

Title BOARD MEMBER
Name USHE, ALYONA
Address 4511 S. OCEAN BLVD
106
City-State-Zip: HIGHLAND BEACH FL 33487

Title BOARD MEMBER
Name STEVE, MICHAEL
Address 20 S SWINTON
City-State-Zip: DELRAY BCH FL 33444

Title BOARD MEMBER
Name LOWENTHAL, RICHARD
Address 180 NE 1ST STREET
City-State-Zip: DELRAY BCH FL 33444

Title BOARD MEMBER
Name FREEMAN, KATHERINE
Address 180 NE 1ST STREET
City-State-Zip: DELRAY BCH FL 33444

Title BOARD MEMBER
Name FERGUSON, LYNN
Address 180 NE 1ST STREET
City-State-Zip: DELRAY BCH FL 33444

Title BOARD MEMBER
Name BENTKOVER, ADAM
Address 180 NE 1ST STREET
City-State-Zip: DELRAY BCH FL 33444

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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: ALYONA USHE

PRESIDENT/CEO

03/04/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name SCHILLINGER, BRENT
Address 180 NE 1ST STREET
City-State-Zip: DELRAY BCH FL 33444

Title TREASURER
Name BURNSIDE, FRANK
Address 180 NE 1ST STREET
City-State-Zip: DELRAY BEACH FL 33444

Title BOARD MEMBER
Name ARMOUR, PETER
Address 180 NE 1ST STREET
City-State-Zip: DELRAY BEACH FL 33444

Title BOARD MEMBER
Name BANKIER, ADAM
Address 101 SE 6TH AVENUE
SUITE C
City-State-Zip: DELRAY BEACH FL 33483

Title VC
Name VAN ARNEM, HAROLD
Address 180 NE 1ST STREET
City-State-Zip: DELRAY BEACH FL 33444