

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000008361

Entity Name: CROOKED CREEK HOMES ASSOCIATION OF JEFFERSON COUNTY, INC.

**FILED
Jun 30, 2020
Secretary of State
9147830093CC**

Current Principal Place of Business:

2121 KILLARNEY WAY
TALLAHASSEE, FL 32309

Current Mailing Address:

POST OFFICE BOX 11143
TALLAHASSEE, FL 32302 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA ASSOCIATION & PROPERTY MANAGEMENT,
2121 KILLARNEY WAY, SUITE E
TALLAHASSEE, FL 32309 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 P
Name BARINEAU, RAY
Address POST OFFICE BOX 11143
City-State-Zip: TALLAHASSEE FL 32302

Title T
Name COOPER, CHARLES
Address POST OFFICE BOX 11143
City-State-Zip: TALLAHASSEE FL 32302

Title VP
Name GREEN, BENSON
Address POST OFFICE BOX 11143
City-State-Zip: TALLAHASSEE FL 32302

Title MANAGING AGENT
Name FLORIDA ASSOCIATION & PROPERTY MANAGEMENT, INC.
Address POST OFFICE BOX 11143
City-State-Zip: TALLAHASSEE FL 32302

Title S
Name FAGLIE, FLOYD
Address POST OFFICE BOX 11143
City-State-Zip: TALLAHASSEE FL 32302

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: JOANIE TROTMAN

CAM

06/30/2020

Electronic Signature of Signing Officer/Director Detail

Date