

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16174

Entity Name: COUNTRY CLUB VILLAGE I OF CROSS CREEK CONDOMINIUM ASSOCIATION, INC.**FILED**
Feb 23, 2018
Secretary of State
CC1812868948**Current Principal Place of Business:**12995 S. CLEVELAND AVE.
#176
FT MYERS, FL 33907**Current Mailing Address:**12995 S. CLEVELAND AVE.
#176
FT MYERS, FL 33907 US**FEI Number: 65-0824902****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**STARFISH ASSOC. MANAGEMENT, LLC
12995 S. CLEVELAND AVE.
#176
FT MYERS, FL 33907 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	PRESIDENT, DIRECTOR
Name	PRESLEY, GARY
Address	12995 S. CLEVELAND AVE. #176
City-State-Zip:	FT MYERS FL 33907

Title	VP, DIRECTOR
Name	GROVE, BRAD
Address	12995 S. CLEVELAND AVE. #176
City-State-Zip:	FT MYERS FL 33907

Title	DIRECTOR
Name	HERMAN, AL
Address	12995 S. CLEVELAND AVE. #176
City-State-Zip:	FT MYERS FL 33907

Title	DIRECTOR
Name	CARMAN, MARILYN
Address	12995 S. CLEVELAND AVE. #176
City-State-Zip:	FT MYERS FL 33907

Title	SECRETARY, TREASURER
Name	BAIRD, LEONEL
Address	12995 S. CLEVELAND AVE. #176
City-State-Zip:	FT MYERS FL 33907

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: GARY PRESLEY**PRESIDENT****02/23/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date