

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N17755

Entity Name: CROSS CREEK PATIO HOMES OWNERS ASSOCIATION, INC.

FILED
Jun 16, 2016
Secretary of State
CC4777852754

Current Principal Place of Business:

C/O ANCHOR ASSOICATES, INC.
3940 RADIO ROAD SUITE 112
NAPLES, FL 34104

Current Mailing Address:

C/O ANCHOR ASSOCIATES, INC.
3940 RADIO ROAD SUITE 112
NAPLES, FL 34104 US

FEI Number: 59-2784965

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANCHOR ASSOCIATES, INC.
3940 RADIO ROAD
SUITE 112
NAPLES, FL 34104 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: BRAD PHELPS

06/16/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BRASS, ALAN
Address C/O ANCHOR ASSOICATES, INC.
3940 RADIO ROAD SUITE 112
City-State-Zip: NAPLES FL 34104

Title PRESIDENT
Name GELFUND, VICKI
Address C/O ANCHOR ASSOICATES, INC.
3940 RADIO ROAD SUITE 112
City-State-Zip: NAPLES FL 34104

Title SECRETARY
Name DELAPAZ, RICHARD
Address C/O ANCHOR ASSOICATES, INC.
3940 RADIO ROAD SUITE 112
City-State-Zip: NAPLES FL 34104

Title VP
Name FLINT, NANCY
Address C/O ANCHOR ASSOICATES, INC.
3940 RADIO ROAD SUITE 112
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name RICKEY, JANE
Address C/O ANCHOR ASSOICATES, INC.
3940 RADIO ROAD SUITE 112
City-State-Zip: NAPLES FL 34104

Title D
Name WHEELER, KAREN
Address C/O ANCHOR ASSOICATES, INC.
3940 RADIO ROAD SUITE 112
City-State-Zip: NAPLES FL 34104

Title TREASURER
Name BRIDGES, JEFF
Address C/O ANCHOR ASSOICATES, INC.
3940 RADIO ROAD SUITE 112
City-State-Zip: NAPLES FL 34104

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: VICKI GELFUND

PRESIDENT

06/16/2016

Electronic Signature of Signing Officer/Director Detail

Date