

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17755

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

FILED
Apr 01, 2020
Secretary of State
9257785332CC

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

04/01/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
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 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 SECRETARY
Name WILFORD, KAREN
Address C/O ANCHOR ASSOCIATES, 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

04/01/2020

Electronic Signature of Signing Officer/Director Detail

Date