2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25721

Entity Name: CROSS CREEK II PATIO HOME OWNERS ASSOCIATION, INC.

FILED
Apr 10, 2013
Secretary of State
CC1597793993

Current Principal Place of Business:

C/O ASSOCIATION SERVICES OF FLORIDA 10112 USA TODAY WAY MIRMAR, FL 33025

Current Mailing Address:

C/O ASSOCIATION SERVICES OF FLORIDA 10112 USA TODAY WAY MIRMAR, FL 33025

FEI Number: 65-0055067 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ULM, JEFFREY C/O ASSOCIATION SERVICES OF FLORIDA 10112 USA TODAY WAY MIRAMAR, FL 33025 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: JEFFREY ULM 04/10/2013

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **PRES** Title SEC Name LOGVIN, SCOTT PRES Name FASO, MARY SEC 1845 N.W. 99TH AVE 9861 NW 18TH PLACE Address Address PLANTATION FL 33322 PLANTATION FL 33322 City-State-Zip: City-State-Zip: ٧P Title **TRES** Title Name BAUMAN, ARNOLD RADICE, JAMES TRES Name Address 9820 NW 18TH PLACE 1831 N.W. 99TH AVENUE Address City-State-Zip: PLANTATION FL 33322 City-State-Zip: PLANTATION FL 33322

Title **DIRECTOR** Title DIRECTOR Name HAGGERTY, DIANE Name SCHROLD, JAY Address 9720 NW 18TH DRIVE Address 9801 NE 18TH COURT City-State-Zip: PLANTATION FL 33322 City-State-Zip: PLANTATION FL 33322

Title DIRECTOR

Name TIZZANI, FLINO

Address 9741 NW 18TH DRIVE

City-State-Zip: PLANTATION FL 33322

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: LOGVIN, SCOTT PRES 04/10/2013