

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32460

FILED
Apr 14, 2021
Secretary of State
1216774234CC

Entity Name: COUNTRY CREEK ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST STATE ROAD 434
SUITE 5000
LONGWOOD, FL 32779

Current Mailing Address:

2180 WEST STATE ROAD 434
SUITE 5000
LONGWOOD, FL 32779 US

FEI Number: 59-2954422

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SENTRY MANAGEMENT INC
2180 WEST STATE ROAD 434
SUITE 5000
LONGWOOD, FL 32779 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: BRADLEY POMP

04/14/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name MATUTE, JORGE
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title SECRETARY, DIRECTOR
Name MOSER, JOEL
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title TREASURER, DIRECTOR
Name YOFFEE, DAVID
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name SPORLEDER, CARLOS
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name WAITE, ELIZABETH
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name SINGH, KARUNA
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name BASHER, DAVID
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

Title VP
Name TORRES, MANNY
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779

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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: JORGE MATUTE

PRESIDENT

04/14/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SHELTON, MARY
Address 2180 WEST SR 434 STE 5000
City-State-Zip: LONGWOOD FL 32779