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 un 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 apprendence, or on an attachment with all other like empowered.			
SIGNATURE: RICHARD PRITZKER	DIRECTOR	02/08/2013	

SIGNATURE: RICHARD PRITZKER

Electronic Signature of Signing Officer/Director Detail

Title PD Title ПОТ

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.

# **Officer/Director Detail :**

SIGNATURE:

Title	PD	Title	DST
Name	PRITZKER, TOBI PRES	Name	PRITZKER, RICHARD SEC/T
Address	3728 ALDERGATE PL	Address	3728 ALDERGATE PL
City-State-Zip:	CASSELBERRY FL 32707	City-State-Zip:	CASSELBERRY FL 32707
Title	VD		
Name	BOSSE, TIMOTHY VP		
Address	3737 ALDERGATE PL		
City-State-Zip:	CASSELBERRY FL 32707		

# 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N38128

### Entity Name: HOWELL CREEK PARK HOMEOWNERS' ASSOCIATION, INC.

#### **Current Principal Place of Business:**

3728 ALDERGATE PL CASSELBERRY, FL 32707

#### **Current Mailing Address:**

3728 ALDERGATE PL CASSELBERRY, FL 32707 US

#### FEI Number: 59-3009238

#### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

PRITZKER, RICHARD SEC 3728 ALDERGATE PL CASSELBERRY, FL 32707-6300 US

FILED Feb 08, 2013 Secretary of State CC1838184924

Certificate of Status Desired: No

/TRE

Date

Date