2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005129

Entity Name: CEDAR CREEK PROPERTY OWNERS ASSOCIATION, INC.

FILED
Apr 22, 2013
Secretary of State
CC3218478824

Current Principal Place of Business:

C/O COMPASS MANAGEMENT GROUP 4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103

Current Mailing Address:

C/O COMPASS MANAGEMENT GROUP 4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103 US

FEI Number: 65-0489975 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMPASS GROUP 4851 TAMIAMI TRAIL NORTH STE 400 NAPLES, FL 34103 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title DIRECTOR

Name DAVIS, GLENN Name ZIMMERMAN, LLOYD

Address C/O COMPASS MANAGEMENT Address C/O COMPASS MANAGEMENT GROUP Address C/O COMPASS MANAGEMENT GROUP

GROUP

4851 TAMIAMI TRAIL N STE 400

GROUP

4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title VP Title TREASURER

Name COURY, GREGORY Name BERENS, DENNIS

Address C/O COMPASS MANAGEMENT Address C/O COMPASS MANAGEMENT

GROUP GROUP

4851 TAMIAMI TRAIL N STE 400 4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title SECRETARY
Name DROKE, DON

Address C/O COMPASS MANAGEMENT

GROUP

4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103

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: GLENN DAVIS PRESIDENT 04/22/2013