

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 651647

FILED
Apr 30, 2008
Secretary of State

Entity Name: APPLE CREEK RECREATIONAL ASSOCIATION, INC.

Current Principal Place of Business:

7301 W SUNRISE BLVD,
PLANTATION, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

7301 W SUNRISE BLVD
PLANTATION, FL 33313 US

New Mailing Address:

7301 W SUNRISE BLVD,
PLANTATION, FL 33313 US

FEI Number: 59-2107112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOBART, ROBERT B
7301 W SUNRISE BLVD
PLANTATION, FL 33313 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HENDERSON, HERMAN
Address: 7301 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33313

Title: DVP () Delete
Name: BONGIOVANNI, SALVATORE
Address: 7301 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33313

Title: DT () Delete
Name: THOMAS, SHARON
Address: 7387 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33313

Title: DS () Delete
Name: LEE, KIM
Address: 7301 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33313

Title: D () Delete
Name: BROWNING, CHARLES
Address: 7301 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33313

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT HOBART

RA

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date