

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90380 036 ****61.25

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03132006 Chg-NP CR2E037 (11/05)

DOCUMENT # 738165 1. Entity Name THE CROSSINGS HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 11578 SW 132 AVD MIAMI, FL 33186			Mailing Address 11578 SW 132 AVD MIAMI, FL 33186		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-1801747	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent BROUGH, CHADROW & LEVINE, P.A. GLOBAL COMMERCE CENTER 1900 NORTH COMMERCE PKWY WESTON, FL 33326				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROLDAN, GUSTAVO 10810 SW 136 CT MIAMI, FL 33186 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KALIL, GEORGE 11767 SW 132 PL MIAMI, FL 33186 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KUNZLER, ROBERT A 13428 SW 108 ST CIR N MIAMI, FL 33186 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JANAVEY, PHIL 13417 SW 113 TERR MIAMI, FL 33186 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELLINGER, LESLIE 13252 SW 112 TERR MIAMI, FL 33186 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SINNOT, JACK 10930 SW 136 CT MIAMI, FL 33186 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DICKMON, LILLIAN 13401 SW 113 TERRACE MIAMI, FL 33186 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STEIN, CLIFF 11746 SW 132ND PL MIAMI, FL 33186 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: _____ <i>Pres.</i>				3-28-06 305-387-0434	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	