2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mar 10, 2003 8:00 am & Secretary of State **DOCUMENT # 745635** 1. Entity Name 03-10-2003 90126 034 ****61.25 CRANE CREEK PROPERTY OWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 1930 COMMERCE LANE 1930 COMMERCE LANE Suite 1 SUITE 1 JUPITER FL 33458 JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1898734 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name INGLIS, STEVE Street Address (P.O. Box Number is Not Acceptable) C/O BRISTOL MANAGMENT 1930 COMMERCE LANE # 1 JUPITER FL 33458 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE Delete TITLE ☐ Change Addition RICKE, JOE NAME DONDERO, ANNIE 3034 SWWIMBLEDON TERRACE NAME STREET ADDRESS **1859 CRANE CREEK AVE** STREET ADDRESS CITY-ST-ZIP PALM CITY FL 34990 PALM CITY, FL 34990 CITY-ST-ZIP DVP TITLE ☐ Delete TITLE Change Addition MADDEN, BOB NAME STREET ADDRESS 1766 CRAWE CREEK CIR STREET ADDRESS CITY-ST-ZIP PALM CITY FL=34990 CITY-ST-ZIP □ Delete TITLE ☐ Addition Change GRISWOLD, KAREN NAME NAME STREET ADDRESS 1793 SW CRANE CRK AVE STREET ADDRESS CITY-ST-ZIP PALM CITY FL CITY-ST-ZIP DV. TITLE ☐ Delete PD TITLE Change Change ☐ Addition NAME COON, DON NAME STREET ADDRESS 1899 CRANE CREEK AVE STREET ADDRESS CITY-ST-ZIP PALM CITY FL 34990 CITY-ST-ZIP TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SAUM, MATT NAME STREET ADDRESS 2772 SW RACQUET CLUB DR STREET ADDRESS CITY-ST-7IP PALM CITY FL 34990 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental report is the 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 employered 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

LEE. PAT

3612 SW MASHIE CRT

PALM CITY FL 34990

NAME

STREET ADDRESS

CITY-ST-ZIP

REQUIRED

3/4/03 561-575-355/

FILED