

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 01, 2006 8:00 am
Secretary of State

09-01-2006 90002 030 ****61.25

40102521



DOCUMENT # 753263 1. Entity Name CHERRY CREEK PROPERTY - OWNERS ASSOCIATION, INC.					
Principal Place of Business 13832 CHERRY CREEK DRIVE TAMPA, FL 33618			Mailing Address 13832 CHERRY CREEK DRIVE TAMPA, FL 33618		
2. Principal Place of Business 13823 CHERRY BROOK LN.		3. Mailing Address 13823 CHERRY BROOK LN.			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State TAMPA, FL		City & State TAMPA, FL.		4. FEI Number NOT APPLICABLE	
Zip 33618		Country 		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BECKER, LARRY A 13832 CHERRY CREEK DRIVE TAMPA, FL 33618				7. Name and Address of New Registered Agent Name BECKER, LARRY A. Street Address (P.O. Box Number is Not Acceptable) 13823 CHERRY BROOK LN. City TAMPA FL Zip Code 33618	
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 LARRY A. BECKER <i>Larry A. Becker</i> 7/3/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input checked="" type="checkbox"/> Delete DIMATTEO, MANNY 13839 CHERRY CREEK DR TAMPA, FL 33618				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Delete ABECKER, LARRY 13832 CHERRY CREEK DRIVE TAMPA, FL 33618				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Delete KOSTO, SUE 14011 CASCADE LANE TAMPA, FL 33618				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input type="checkbox"/> Delete MURPHREE, ROBERT 13805 CHERRY CREEK DR TAMPA, FL 33618				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ARGELIO ALFONSO 13923 BRIARDALE TAMPA, FL 33618				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TING STEPTOE 14030 CHERRY LAKE TAMPA FL 33618				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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>Larry A. Becker</i> LARRY A. BECKER 8/24/06 (813)265-4591 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					