2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#761336

FILED Jan 11, 2011 Secretary of State

Entity Name: THE CROSSINGS HOME OWNERS ASSOCIATION, INC. OF MARTIN COUNTY

Current Principal Place of Business: New Principal Place of Business:

1700 SW CROSSING CIR PALM CITY, FL 34990 US

Current Mailing Address: New Mailing Address:

1700 SW CROSSING CIR PALM CITY, FL 34990 US

FEI Number: 59-2811430 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSS, DEBORAH L ESQ
401 EAST OSCEOLA STREET
FIRST FLOOR RIVER OAK CENTER
STUART, FL 34994 US

ROSS, DEBORAH L ESQ
789 S. FEDERAL HIGHWAY
SUITE 101
STUART, FL 34994 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: 01/11/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: SMYTH, LINDA

Address: 1571 SW CROSSING CIR City-St-Zip: PALM CITY, FL 34990

Title: VPD

Name: PRICE, CLYDE

Address: 1671 SW CROSSING CIRCLE City-St-Zip: PALM CITY, FL 34990

Title: TD

 Name:
 MCCORY, CHRIS M

 Address:
 1645 SW CROSSING CIR

 City-St-Zip:
 PALM CITY, FL 34990

Title:

Name: KNAUBER, DOLORES
Address: 1638 SW CROSSING CIR
City-St-Zip: PALM CITY, FL 34990

Title:

 Name:
 BLACKENSHIP, JAMES

 Address:
 1655 SW CROSSING CIR

 City-St-Zip:
 PALM CITY, FL 34990

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: LINDA SMYTH P 01/11/2011