5/13

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 13, 2002 8:00 am
Secretary of State
05-13-2002 90045 038 ****61.25

DOCUMENT # N00000003128

1. Entity Name

CROSS CREEK AT SUMMERTREE HOMEOWNERS ASSOCIATION , INC.

Principal Place of Business	Mailing Address
8640 SEMINOLE BLVD. SEMINOLE FL 33772	P O BOX 4696 SEMINOLE FL 33775

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number APPLIED FOR ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOFSTRA, PETER T 8640 SEMINOLE BLVD. SEMINOLE FL 33772	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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LEACH, GERALD J P.O. BOX 4696 SEMINOLE FL 33775	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ENGELHARDT, DANIEL A P.O. BOX 17309 CLEARWATER FL 34622	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ENGELHARDT, STEVE E P.O. BOX 17309 CLEARWATER FL 34622	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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 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: Gerald Leach GERALD LEACH April 24, 2002 727 593 7716
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment 9/26/20

CROSS CREEK AT SUMMERTREE HOMEOWNERS ASSOCIATION, INC.
P.O. Box 4696
Seminole, Florida 33775
Tel (727) 593-7716 Fax (727) 593-7714

May 31, 2002

Florida Department Of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: N00000003128

Gentlemen:

Referring to your correspondence of May 18, 2002 (copy attached), enclosed please find copy of uniform business report previously submitted on April 24, 2002. Please be advised the FEI for Cross Creek At Summertree Homeowners Association, Inc. is EIN 59-3711312.

Thank you.

Very truly yours,

Cross Creek At Summertree Homeowners Assoc., Inc.

Gerald J. Leach
President

GJL/cs

Encls.