

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005025

FILED
Apr 07, 2009
Secretary of State

Entity Name: CEDAR CREEK RANCH ASSOCIATION, INC.

Current Principal Place of Business:

2950 JOG ROAD
GREENACRES, FL 33467 US

New Principal Place of Business:

2950 JOG ROAD
GREENACRES, FL 33467

Current Mailing Address:

2950 JOG ROAD
GREENACRES, FL 33467 US

New Mailing Address:

C/O CMC MANAGEMENT
2950 JOG ROAD
GREENACRES, FL 33467 US

FEI Number: 20-0493372

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVE., SOUTH, SUITE 400
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MYERS, BRADY
Address: 4187 CEDAR CREEK RANCH CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: VP () Delete
Name: KRISTOV, LAURA
Address: 4168 CEDAR CREEK RANCH CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: S () Delete
Name: RUSZCYK, ONITA
Address: 4120 CEDAR CREEK RANCH CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: ZEITZ, PATRICK
Address: 4193 CEDAR CREEK RANCH CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete
Name: SIMONELLI, KATHY
Address: 4174 CEDAR CREEK RANCH
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HRISTOV, LAURE
Address: 4168 CEDAR CREEK RANCH CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LAURE HRISTOV

V

04/07/2009

Electronic Signature of Signing Officer or Director

_____ Date