

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 14, 2009
Secretary of State**

DOCUMENT# N03000007773

Entity Name: CREEKSIDE OAKS AT MANATEE HOMEOWNERS' ASSOCIATION INC.

Current Principal Place of Business:

381 INTERSTATE BLVD.
SARASOTA, FL 34240

New Principal Place of Business:

381 INTERSTATE BLVD.
SARASOTA, FL 34240

Current Mailing Address:

PO BOX 891
ELLENTON, FL 34222

New Mailing Address:

FEI Number: 41-2126753 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUNVAST MANAGEMENT
381 INTERSTATE BLVD.
SARASOTA, FL 34230 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: VP () Delete
Name: JORDAN, STANLEY D
Address: 4432 85TH AVE CR E
City-St-Zip: PARRISH, FL 34219

Title: T () Delete
Name: RICCIARDI, JOE
Address: 4357 85TH ACE CIR E
City-St-Zip: PARRISH, FL 34219

Title: SD () Delete
Name: DEBORAH, LEONARD
Address: 4436-85TH AVE CIR EAST
City-St-Zip: PARRISH, FL 34219

Title: D (X) Delete
Name: FLEMISH, WILLIAM
Address: 4416 85TH AVE CIR EAST
City-St-Zip: PARRISH, FL 34219

Title: DP (X) Delete
Name: WELDON, NATALIE
Address: 4443-85TH AVE CIRCLE
City-St-Zip: PARRISH, FL 34219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KLEMISH, WILLIAM
Address: 4416 85TH AVE CIRCLE EAST
City-St-Zip: PARRISH, FL 34219

Title: T (X) Change () Addition
Name: VANDOLAH, JOHN
Address: 4397 85TH AVE CIRCLE EAST
City-St-Zip: PARRISH, FL 34219

Title: S (X) Change () Addition
Name: DEBORAH, LEONARD
Address: 4436 85TH AVE CIR EAST
City-St-Zip: PARRISH, FL 34219

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: WILLIAM KLEMISH

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date