

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90186 050 ****61.25

DOCUMENT # N04000008083

1. Entity Name
CREEK VIEW OWNERS ASSOCIATION, INC.



Principal Place of Business
 1410 NW 13 ST
 # 2
 GAINESVILLE, FL 32601 US

Mailing Address
 1410 NW 13 ST
 # 2
 GAINESVILLE, FL 32601 US

2. Principal Place of Business
 4131 NW 13th Street

3. Mailing Address
 4131 NW 13th Street

Suite, Apt. #, etc.
 Suite 207

Suite, Apt. #, etc.
 Suite 207

City & State
 Gainesville, FL

City & State
 Gainesville, FL

Zip
 32609

Country
 USA

Zip
 32609

Country
 USA

01172006 Chg-NP CR2E037 (11/05)



4. FEI Number
 20-2564664

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHEMA, RONALD J
 1410 NW 13 ST
 # 2
 GAINESVILLE, FL 32601

7. Name and Address of New Registered Agent

Name
Sally Ann Wilson/Sun Lu Properties, Inc

Street Address (P.O. Box Number is Not Acceptable)
 4131 NW 13th Street

Suite 207

City Gainesville, FL **FL** Zip Code **32609**

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  DATE **4-28-06**

Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$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	<input type="checkbox"/> Delete
P	SHEMA, RONALD J	1410 NW 13 ST, # 2	GAINESVILLE, FL 32601	<input type="checkbox"/>
VP	HAYES, JOHN	1410 NW 13 ST, # 2	GAINESVILLE, FL 32601	<input type="checkbox"/>
T	HAYES, DEBBIE	1410 NW 13 ST, # 2	GAINESVILLE, FL 32601	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:  DATE **4-28-06** Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR