

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011143

FILED
Sep 04, 2012
Secretary of State

Entity Name: COBBLESTONE CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O OXYGEN ASSOCIATION SERVICES
2801 NORTH UNIVERSITY DRIVE SUITE 204
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

C/O OXYGEN ASSOCIATION SERVICES
2801 NORTH UNIVERSITY DRIVE SUITE 204
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 20-2052337 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LIPPMAN, KAREN
2801 NORTH UNIVERSITY DRIVE SUITE 204
SUITE 204
CORAL SPRINGS, FL 33065 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: P/T
Name: BOWES, MARK
Address: 8621 COBBLESTONE POINT CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472

Title: VP
Name: GALLACHER, MICHAEL
Address: 8911 COBBLESTONE POINT CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472

Title: SEC
Name: BIANCHINI, JOHN
Address: 8572 COBBLESTONE CREEK DRIVE
City-St-Zip: BOYNTON BEACH, FL 33472

Title: DIR
Name: PAREDES, ROSSANA
Address: 9557 COBBLESTONE CREEK DR
City-St-Zip: BOYNTON BEACH, FL 33472

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: FERN ROSENTHAL

ADMI

09/04/2012

Electronic Signature of Signing Officer or Director

Date