

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002224

FILED
Apr 27, 2009
Secretary of State

Entity Name: CREEKSIDE COMMUNITY ASSOCIATION, INC. OF CHARLOTTE COUNTY

Current Principal Place of Business:

3450 BUSCHWOOD PARK DRIVE
SUITE 250
TAMPA, FL 33618

New Principal Place of Business:

11691 GATEWAY BOULEVARD
SUITE 203
FORT MYERS, FL 33913

Current Mailing Address:

3450 BUSCHWOOD PARK DRIVE
SUITE 250
TAMPA, FL 33618

New Mailing Address:

11691 GATEWAY BOULEVARD
SUITE 203
FORT MYERS, FL 33913

FEI Number: 83-0425080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOND, KEVIN
3450 BUSCHWOOD PARK DRIVE
SUITE 250
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

VISION MANAGEMENT
11691 GATEWAY BOULEVARD
SUITE 203
FORT MYERS, FL 33913 US

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: REBECCA SARVER

04/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FIREBAUGH, CHLOE R
Address: 3450 BUSCHWOOD PARK DRIVE, SUITE 250
City-St-Zip: TAMPA, FL 33618

Title: DVP () Delete
Name: BOND, KEVIN
Address: 3450 BUSCHWOOD PARK DRIVE, SUITE 250
City-St-Zip: TAMPA, FL 33618

Title: DST () Delete
Name: EDWARDS, DAN
Address: 3450 BUSCHWOOD PARK DRIVE, SUITE 250
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: EDWARDS, DAN
Address: 9102 SOUTHPARK CENTER LOOP #100
City-St-Zip: ORLANDO, FL 32819

Title: DVP (X) Change () Addition
Name: BRINDLEY, JEFF
Address: 9102 SOUTHPARK CENTER LOOP #100
City-St-Zip: ORLANDO, FL 32819

Title: DST (X) Change () Addition
Name: CAMP, JEREMY
Address: 9102 SOUTHPARK CENTER LOOP #100
City-St-Zip: ORLANDO, FL 32819

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: DAN EDWARDS

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date