

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008788

FILED
Mar 10, 2009
Secretary of State

Entity Name: CROSBY CROSSINGS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1463 OAKFIELD DR.
SUITE 142
BRANDON, FL 33511

New Principal Place of Business:

1463 OAKFIELD DRIVE
SUITE 142
BRANDON, FL 33511

Current Mailing Address:

MCNEIL MANAGEMENT SERVICES, INC.
P.O. BOX 6235
BRANDON, FL 335086004

New Mailing Address:

FEI Number: 20-3981396 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TANKEL, ROBERT P.A.
1022 MAIN STREET
SUITE D
DUNEDIN, FL 34698 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: KARPAY, BARRY I
Address: 5100 W. LEMON ST., STE 306
City-St-Zip: TAMPA, FL 33609

Title: VPD () Delete
Name: MESSINA, FRANK
Address: 5100 W. LEMON ST., STE 306
City-St-Zip: TAMPA, FL 33609

Title: STD () Delete
Name: HUDRLIK, DEBORA L
Address: 5100 W. LEMON ST., STE 306
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KARPAY, BARRY
Address: 5100 W. LEMON ST., STE 312
City-St-Zip: TAMPA, FL 33609

Title: VP (X) Change () Addition
Name: MESSINA, FRANK
Address: 5100 W. LEMON ST., STE 312
City-St-Zip: TAMPA, FL 33609

Title: S/T (X) Change () Addition
Name: HUDRLIK, DEBORA
Address: 5100 W. LEMON ST., STE 312
City-St-Zip: TAMPA, FL 33609

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: DEBORA HUDRLIK

S/T

03/10/2009

Electronic Signature of Signing Officer or Director

Date