

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002108

FILED
Apr 26, 2012
Secretary of State

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

Current Principal Place of Business:

8141 54TH AVE. NORTH
ST. PETERSBURG, FL 33709

New Principal Place of Business:

1021 OAK STREET
JACKSONVILLE, FL 32204

Current Mailing Address:

18636 MENTMORE BLVD.
LAND O'LAKES, FL 34638

New Mailing Address:

18636 MENTMORE BLVD
LAND O'LAKES, FL 34638

FEI Number: 02-0786966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VESTA PROPERTY SERVICES
8141 54TH AVE NORTH
ST.PETERSBURG, FL 33709 US

Name and Address of New Registered Agent:

BRASFIELD, FREEMAN, GOLDIS & CASH
2553 FIRST AVE N
ST.PETERSBURG, FL 33713 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: CARY CASH

04/26/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: VANHEYNEGEN, DOREEN
Address: 1021 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: VPS
Name: RENTZ, ELLEN
Address: 1021 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: T
Name: STEVENS, YAHAYRA
Address: 1021 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: S
Name: RENTZ, ELAINE
Address: 1021 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: D
Name: GRUBE, RICHARD
Address: 1021 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

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: DOREEN VANHEYNEGEN

P

04/26/2012

Electronic Signature of Signing Officer or Director

Date