## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N06000003716

FILED Sep 30, 2009 Secretary of State

Entity Name: CREEK'S EDGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1810 NW 23RD BLVD **CLUBHOUSE** GAINESVILLE, FL 32605

**New Mailing Address: Current Mailing Address:** 

5522 NW 43RD STREET SUITE B GAINESVILLE, FL 32653

FEI Number: 20-2828104 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOUDERSHELT, BOBBY 5522 NW 43 STREET SUITE B GAINESVILE, FL 32653 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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete ZAHN, RICHARD G CLARKE, RICHARD Name: Name: 688 FLORIDA CENTRAL PARKWAY Address: 5139 S. NICHOLO STREET Address:

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: TAMPA, FL 33611

Title: ( ) Delete Title: (X) Change ( ) Addition

ZAHN, MICHELE Name: FANT, GREGORY Name: Address: 688 FLORIDA CENTRAL PARKWAY Address:

3464 SE FIRWAY OAKS TRAIL

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: STUART, FL 34997

Title: DS () Delete Title: DS (X) Change ( ) Addition MEADERS, ANNE LEVY, ILANA Name: Name:

1810 NW 23RD BLVD. 1810 NW 23RD BLVD. #213 Address: Address:

City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: GAINESVILLE, FL 32605

Title: Title: DVP ( ) Change (X) Addition ( ) Delete

Name: Name: BOLINGER, ERIC Address: Address: 1810 NW 23 BLVD. #123 City-St-Zip: City-St-Zip: GAINESVILLE, FL 32605

Title: () Delete Title: ( ) Change (X) Addition

KIEM, LARRY Name: Name:

477 COMMERCE WAY #115 Address: Address: City-St-Zip: City-St-Zip: LONGWOOD, FL 32750

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: RICHARD CLARKE **PRES** 09/30/2009