

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06343

FILED
Apr 28, 2006
Secretary of State

Entity Name: CREEK HOLLOW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

103 CREEK HOLLOW LANE
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

Current Mailing Address:

103 CREEK HOLLOW LANE
MIDDLEBURG, FL 32068 US

New Mailing Address:

FEI Number: 59-2535902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLISTER, DELINA J
103 CREEK HOLLOW LANE
MIDDLEBURG, FL 32068 US

Name and Address of New Registered Agent:

HOLLISTER, DELMA J
103 CREEK HOLLOW LANE
MIDDLEBURG, FL 32068 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: DELMA J HOLLISTER

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BRITT, ELIZABETH
Address: 102 CREEK HOLLOW LANE
City-St-Zip: MIDDLEBURG, FL 32068

Title: S () Delete
Name: MENDHI, GABRIELE
Address: 121 CREEK HOLLOW LN
City-St-Zip: MIDDLEBURG, FL 32068

Title: VD () Delete
Name: MANS, MARGARET
Address: 108 CREEK HOLLOW LANE
City-St-Zip: MIDDLEBURG, FL 32068

Title: T () Delete
Name: HOLLISTER, DELMA J
Address: 103 CREEK HOLLOW LN
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DELMA J HOLLISTER

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04/28/2006

Electronic Signature of Signing Officer or Director

Date