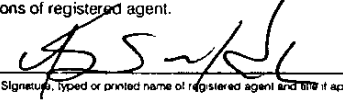
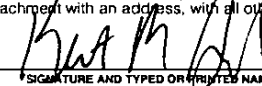


2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

03 OCT 29 AM 10:33
CLARKE, G. STANLEY
TALLAHASSEE, FLORIDA

DOCUMENT # N07000008787					
1. Entity Name CALUSA CREEK TOWNHOMES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 11691 GATEWAY BOULEVARD, SUITE 203 FORT MYERS, FL 33913			Mailing Address 11691 GATEWAY BOULEVARD, SUITE 203 FORT MYERS, FL 33913		
2. Principal Place of Business - No P.O. Box # 8359 Beacon Blvd.		3. Mailing Address 8359 Beacon Blvd.		09172008 Chg-NP CR2E037 (12/06)	
Suite, Apt. #, etc. Suite 313		Suite, Apt. #, etc. Suite 313		4. FEI Number 26-1603211	
City & State Fort Myers, FL		City & State Fort Myers, FL		Applied For Not Applicable	
Zip 33907	Country USA	Zip 33907	Country USA	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent S & S GOLF MANAGEMENT, INC. 11691 GATEWAY BOULEVARD, SUITE 203 FORT MYERS, FL 33913				7. Name and Address of New Registered Agent Name Hayden & Associates Street Address (P.O. Box Number is Not Acceptable) Attn: Kenneth W. Hayden 8359 Beacon Blvd. Suite 313 City Fort Myers FL Zip Code 33907	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE 9/26/08					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CLARK, KEVIN 11691 GATEWAY BOULEVARD, SUITE 203 FORT MYERS, FL 33913 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P Brown, Thomas W. 8359 Beacon Blvd Fort Myers, FL 33907 ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BEULAH, ALAN 11691 GATEWAY BOULEVARD, SUITE 203 FORT MYERS, FL 33913 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S/T Zernich, Kurt M. 8359 Beacon Blvd. Fort Myers, FL 33907 ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T HERMINA, MANNY 11691 GATEWAY BOULEVARD, SUITE 203 FORT MYERS, FL 33913 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Trkla, Thomas N. 8359 Beacon Blvd Fort Myers, FL 33907 ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	900137432909 10/29/08--01034--011 **\$61.25 ☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  Kurt M. Zernich				Date 10-21-08 Daytime Phone # 978-927-8300	

10/30/08