

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07026

FILED  
Mar 01, 2012  
Secretary of State

**Entity Name:** CROSS CREEK OF FORT MYERS SINGLE FAMILY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

11595 KELLY ROAD  
SUITE 122  
FORT MYERS, FL 33908 US

**New Principal Place of Business:**

16266 SAN CARLOS BLVD  
SUITE 10  
FORT MYERS, FL 33908 US

**Current Mailing Address:**

11595 KELLY ROAD  
SUITE 122  
FORT MYERS, FL 33908 US

**New Mailing Address:**

16266 SAN CARLOS BLVD  
SUITE 10  
FORT MYERS, FL 33908 US

**FEI Number:** 59-2646533

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANDCASTLE PROPERTY MGMT & BROKERAGE  
11595 KELLY ROAD  
SUITE 122  
FORT MYERS, FL 33908 US

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

SANDCASTLE PROPERTY MGMT & BROKERAGE  
16266 SAN CARLOS BLVD  
SUITE 10  
FORT MYERS, FL 33908 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:

03/01/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: O'FLYNN, ROBERT  
Address: 16266 SAN CARLOS BLVD  
City-St-Zip: FORT MYERS, FL 33908

Title: VP  
Name: ARONOWSKI, CHIP  
Address: 16266 SAN CARLOS BLVD  
City-St-Zip: FORT MYERS, FL 33908

Title: S  
Name: RICHARDSON, KEN  
Address: 16266 SAN CARLOS BLVD  
City-St-Zip: FORT MYERS, FL 33908

Title: T  
Name: ROUSSEAU, JOHN  
Address: 16266 SAN CARLOS BLVD  
City-St-Zip: FORT MYERS, FL 33908

Title: VP  
Name: PETERS, DON  
Address: 16266 SAN CARLOS BLVD  
City-St-Zip: FORT MYERS, FL 33908

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: ROBERT O'FLYNN

P

03/01/2012

Electronic Signature of Signing Officer or Director

Date