

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07229

FILED
Apr 14, 2009
Secretary of State

Entity Name: THE VILLAS OF CROSS CREEK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

P & M MGMT
14360 S TAMiami TRAIL B
FORT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

P & M MGMT
14360 S TAMiami TRAIL B
FORT MYERS, FL 33912 US

New Mailing Address:

FEI Number: 59-2529532 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SAPP, PAUL
C/O P & M PROPERTY MANAGEMENT
14360 S TAMiami TRAIL UNIT B
FORT MYERS, FL 33912 US

Name and Address of New Registered Agent:

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:

Title: VP () Delete
Name: LEBEL, CAROL
Address: 15660 SAN CARLOS BLVD #40
City-St-Zip: FORT MYERS, FL 33908

Title: VP () Delete
Name: KOWKOWSKI, RUTH
Address: 14360 S TAMiami TRAIL B
City-St-Zip: FORT MYERS, FL 33912

Title: D (X) Delete
Name: SHEMILL, CARIVETT
Address: 14360 S TAMiami TRAIL B
City-St-Zip: FORT MYERS, FL 33912

Title: P () Delete
Name: RIZZO, DIANE
Address: 13458 ONION CREEK CT
City-St-Zip: FORT MYERS, FL 33912

Title: T () Delete
Name: EASTON, RICHARD
Address: 14360 S TAMiami TRL UNIT B
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: LEBEL, CAROL
Address: 14360 S. TAMiami #B
City-St-Zip: FORT MYERS, FL 33912

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

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Name:
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Name:
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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 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: PAUL SAPP

Electronic Signature of Signing Officer or Director

REG

04/14/2009

Date