

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07229

FILED  
Jan 14, 2010  
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:** 59-2681597

**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  
Name: LEBEL, CAROL  
Address: 14360 S. TAMiami #B  
City-St-Zip: FORT MYERS, FL 33912

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

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

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

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: PAUL SAPP

REG

01/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date