

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15097

FILED  
Mar 27, 2012  
Secretary of State

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

**Current Principal Place of Business:**

C/O ISLAND MANAGEMENT  
711 TARPON BAY ROAD  
SANIBEL, FL 33957

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ISLAND MANAGEMENT  
PO BOX 100  
SANIBEL, FL 33957

**New Mailing Address:**

**FEI Number:** 59-2803363

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MACKESY, STEVEN  
C/O ISLAND MANAGEMENT  
711 TARPON BAY ROAD  
SANIBEL, FL 33957 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: PD  
Name: SMITH, ROGER  
Address: 12785 COLD STREAM DRIVE  
City-St-Zip: FORT MYERS, FL 33912

Title: VD  
Name: ZIEGLER, PETE  
Address: 12783 COLD STREAM DRIVE  
City-St-Zip: FORT MYERS, FL 33912

Title: TD  
Name: SPECKARD, BERT  
Address: 12637 COLD STREAM DRIVE  
City-St-Zip: FORT MYERS, FL 33912

Title: SD  
Name: CHOQUETTE, CHUCK  
Address: 12615 COLD STREAM DRIVE  
City-St-Zip: FORT MYERS, FL 33912

Title: 2VD  
Name: ASCENZO, JOAN  
Address: 12695 COLD STREAM DRIVE  
City-St-Zip: FORT MYERS, FL 33912

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: ROGER SMITH

PD

03/27/2012

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

\_\_\_\_\_  
Date