2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2009
Secretary of State

DOCUMENT# N34604

Entity Name: CORAL CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O INTEGRITY PROPERTY MGMT.
953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

C/O INTEGRITY PROPERTY MGMT.
953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 65-0252330 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KAYE & ROGER, P.A.
6261 NW 6TH WAY, STE. 103
FT. LAUDERDALE, FL 33309 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:	SD	(X) Delete
Name:	HENANN, DEE	
Address:	5524 NW 57 TERRACE	
City-St-Zip:	CORAL SPRINGS, FL 33067	
Title:	PD	( ) Delete
Name:	RITO, GARY	
Address:	5078 NW 57TH WAY	
City-St-Zip:	CORAL SPRINGS, FL 33067	
Title:	VD	( ) Delete
Name:	RENKO, MITCHELL	
Address:	5734 NW 48TH CT.	
City-St-Zip:	CORAL SPRINGS, FL 33067	
Title:	TD	(X) Delete
Name:	LEE, GREGORY	
Address:	5050 NW 56TH CIRCLE	
City-St-Zip:	CORAL SPRINGS, FL 33067	
Title:	D	( ) Delete
Name:	HARROD, DALE	
Address:	4928 NW 58TH AVE	
City-St-Zip:	CORAL SPRINGS, FL 33067	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: GARY RITO PD 05/06/2009

Electronic Signature of Signing Officer or Director — Date