

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34767

FILED
Apr 23, 2008
Secretary of State

Entity Name: CRANE CREEK I HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O GENE BOGER
6767 N. WICKHAM RD.
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

C/O GENE BOGER
6767 N. WICKHAM RD.
MELBOURNE, FL 32940

New Mailing Address:

FAIRWAY MANAGEMENT
1331 BEDFORD DRIVE #103
MELBOURNE, FL 32940

FEI Number: 59-2994797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEY, JIM S
1331 BEDFORD DR. #103
MELBOURNE, FL 32940 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 () Delete
Name: ANDERSON, THOMAS
Address: 1331 BEDFORD DR. #103
City-St-Zip: MELBOURNE, FL 32940

Title: VD () Delete
Name: PEREGINE, DONATO
Address: 1428 OLD MILLPOND RD
City-St-Zip: VIERA, FL 32940

Title: TD () Delete
Name: DASZUTA, JO ANNE
Address: 1331 BEDFORD DR #103
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: TOBIN, BARBARA
Address: 1331 BEDFORD DR. #103
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: PAINTER, DAN
Address: 1103 OLD MILLPOND ROAD
City-St-Zip: VIERA, FL 32940

Title: D () Delete
Name: BROSCHKE, LINDA
Address: 1331 BEDFORD DR. #103
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: PEREGINE, DONATO
Address: 1428 OLD MILLPOND RD
City-St-Zip: VIERA, FL 32940

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

Title: D (X) Change () Addition
Name: RESCHKE, MATT
Address: 1282 OLD MILLPOND
City-St-Zip: MELBOURNE, FL 32940

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: JIM KENNEY

RA

04/23/2008

Electronic Signature of Signing Officer or Director

Date