

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39572

FILED
Mar 17, 2009
Secretary of State

Entity Name: CROSS CREEK AT EAST LAKE WOODLANDS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

720 BROOKER CREEK BLVD #206
OLDSMAR, FL 34677 US

New Principal Place of Business:

Current Mailing Address:

720 BROOKER CREEK BLVD #206
OLDSMAR, FL 34677 US

New Mailing Address:

FEI Number: 59-2553161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCANNAVINO, INC.
720 BROOKER CREEK BLVD #206
OLDSMAR, FL 34677 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: JOHNSTON, ARCHIE
Address: 1507 RIVERDALE DR
City-St-Zip: OLDSMAR, FL 34677

Title: D () Delete
Name: THOMPSON, JIM
Address: 4806 PEBBLE BROOK DR
City-St-Zip: OLDSMAR, FL 34677

Title: TD () Delete
Name: HILLMAN, CONNIE
Address: 1390 RIVER OAKS COURT
City-St-Zip: OLDSMAR, FL 34677

Title: VD () Delete
Name: BOOKER, THOMAS
Address: 1513 RIVERDALE DR
City-St-Zip: OLDSMAR, FL 34677

Title: SD () Delete
Name: RUSSELL, CAROL
Address: 4815 EDGE PARK DR
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOOKER, THOMAS
Address: 1513 RIVERDALE DR
City-St-Zip: OLDSMAR, FL 34677

Title: VD (X) Change () Addition
Name: THORNE, MARC
Address: 1400 WOODSTREAM DRIVE
City-St-Zip: OLDSMAR, FL 34677

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

Title: D (X) Change () Addition
Name: LENETT, STUART
Address: 1381 RIVER OAKS COURT
City-St-Zip: OLDSMAR, FL 34677

Title: D (X) Change () Addition
Name: LEIGH, MARGARET
Address: 1404 WOODSTREAM DRIVE
City-St-Zip: OLDSMAR, FL 34677

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: THOMAS BOOKER

PD

03/17/2009

Electronic Signature of Signing Officer or Director

Date