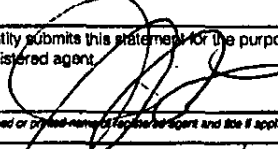
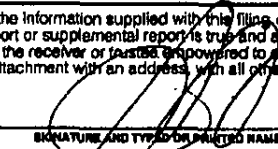


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT****FILED**
May 05, 2008 08:00 AM
Secretary of State

DOCUMENT # N93000005187			
1. Entity Name TRELISES AT ROCK CREEK HOMEOWNERS' ASSOCIATION, INC.			
Principal Place of Business 4150 OPEN WAY COOPER CITY, FL 33026 US		Mailing Address 11500 S. OPEN CT COOPER CITY, FL 33026 US	
DO NOT WRITE IN THIS SPACE			
		04292008 No Chg-NP CR2E037 (4/08)	
		4. FEI Number 65-0467866	Applied For ☐ Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WEIN, JOEL 11500 S. OPEN CT COOPER CITY, FL 33026		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE 		DATE 30 APR 2008	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U00000947084 05/30/08-80075-012 61.25	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP GINSBERG, MARK P 4150 OPEN WAY COOPER CITY, FL 33026	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TDS MUFSON, ERICA 11571 S. OPEN ST. COOPER CITY, FL 33026		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WEIN, JOEL 11500 S. OPEN CT COOPER CITY, FL 33026		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCOTT, BARRINGTON 11531 S. OPEN CT COOPER CITY, FL 33026		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LEVINE, LARRY 4163 OPEN WAY COOPER CITY, FL 33026		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JONTIFF, SANDRA 11551 S. OPEN CT COOPER CITY, FL 33026		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date 30 APR 2008 Daytime Phone # 954 433 4443	