

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90127 029 ****61.25

DOCUMENT # N94000000424

1. Entity Name
CREEKSIDE CROSSING CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**C/O PEGASUS PROPERTY MANAGEMENT
17595 SOUTH TAMiami TRAIL, #100
FORT MYERS, FL 33908 US**

Mailing Address
**C/O PEGASUS PROPERTY MANAGEMENT
17595 SOUTH TAMiami TRAIL, #100
FORT MYERS, FL 33908 US**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03282008

Chg-NP

CR2E037 (12/06)

4. FEI Number
65-0469763

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PEGASUS PROPERTY MANAGEMENT
17595 SOUTH TAMiami TRAIL, #100
FORT MYERS, FL 33908**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> Delete
NAME	NEYER, DON	
STREET ADDRESS	25276 PELICAN CREEK CIR	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134	
TITLE	D L	<input checked="" type="checkbox"/> Delete
NAME	CURRY, THOMAS	
STREET ADDRESS	25244-101 PELICAN CREEK CIR	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134	
TITLE	PD	<input type="checkbox"/> Delete
NAME	ZURIS, PETER	
STREET ADDRESS	252203 PELICAN CREEK CIR, #101	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134	
TITLE	D	<input type="checkbox"/> Delete
NAME	BURTON, ROY	
STREET ADDRESS	25224-101 PELICAN CREEK CIR	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134	
TITLE	D	<input type="checkbox"/> Delete
NAME	HALPIN, KENNETH	
STREET ADDRESS	25272-101 PELICAN CREEK CIR.	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	CHEEK, BERNICE	
STREET ADDRESS	25203 PELICAN CREEK CIRCLE, 201	
CITY-ST-ZIP	BONITA SPRINGS, FL 34134	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TED SMITH	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	BILL Hughes	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Director	
STREET ADDRESS		
CITY-ST-ZIP		

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #