## 2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

## FILED Jan 30, 2002 8:00 am Secretary of State DOCUMENT # N94000004631 CROSS CREEK ESTATES HOMEOWNERS ASSOCIATION VI. I 01-30-2002 90045 016 \*\*\*\*61.25 ·NC. Principal Place of Business Mailing Address 12501 CROSS CREEK BLVD 12501 CROSS CREEK BLVD FORT-MYERS FL 33912 T MYERS FL 33912 2. Principal Place of Business 3. Mailing Address 12798 Kedleston Circle 12798 Kedleston Circle Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Fort Myers 65-0525390 Fort Myers Not Applicable \$8.75 Additional 5. Certificate of Status Desired USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUPP: Robert Street Address (P.O. Box Number is Not Acceptable) -BURNS, ALAN R Circle 10491-SIX-MILE CYPRESS PKWY FT-MYERS-FL-33912 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. Robert P. Krups PRES. - Director (NOTE: Registered Agent Signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PD TITLE TITLE ☐ Change Delete 📈 **Addition** KRUPP, Robert P. 12798 Kedleston Circle NAME **BENSON, STEVE** NAME STREET ADDRESS 10481 SIX MILE CYPRESS PKWY STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33912 CITY-ST-ZIP FORT MYERS, FL 33912 STD TITLE Delete TITLE ☐ Change La Fontaine, Pamela 12756 Kedleston Circle BURNS, ALAN R NAME NAME STREET ADDRESS 10481 SIX MILE CYPRESS PKWY STREET ADDRESS CITY-ST-ZIP Fort Myers, FL 339/2 CITY-ST-ZIP FORT MYERS FL 33912 VD. Delete TITLE ☐ Change ★ Addition # Danety, Ned 12768 Kedleston Circle JOE GRIMES NAME STREET ADDRESS 10481 SIX MILE CYPRESS PKWY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Fort Myers, FL 33912 FT. MYERS FL 33912 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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