

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 8:00 am
Secretary of State

04-20-2007 90075 031 ****61.25

DOCUMENT # N95000002931

1. Entity Name
COUNTRY CROSSING PROPERTY OWNERS
ASSOCIATION, INC.



Principal Place of Business
2334 MILES CT.
LAKELAND, FL 33813 US

Mailing Address
P.O. BOX 344
HIGHLAND CITY, FL 33846 US

90075031



2. Principal Place of Business - No P.O. Box #
2375 MILES CT.

3. Mailing Address
P.O. Box 344

01162007 Chg-NP CR2E037 (12/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
LAKELAND FL

City & State
HIGHLAND CITY FL

4. FEI Number
59-3366630

Applied For
Not Applicable

Zip
33812

Country
US

Zip
33846

Country

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REYCRAFT, RONALD A
2334 MILES CT.
LAKELAND, FL 33813

Name
MICHAEL OXFORD

Street Address (P.O. Box Number is Not Acceptable)
2375 MILES CT.

City
LAKELAND

FL

Zip Code
33812

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]

Michael Oxford

4-17-07

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, 2007

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
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
CALCUTT, KIMBERLY
2302 MILES CT.
LAKELAND, FL 33813 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
ADRIAN, RICHARD
2398 MILES CT.
LAKELAND, FL 33813 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
REYCRAFT, RONALD A
2334 MILES CT.
LAKELAND, FL 33813 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
AYRIS, KATHY
2326 MILES CT.
LAKELAND, FL 33813 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
JEFFREY, CALCUTT
2302 MILES
LAKELAND, FL 33813 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HOWELL, LARRY G
2309 MILES CT.
LAKELAND, FL 33813 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
MATTHEW TOWNLEY
2330 MILES CT.
LAKELAND FL 33812 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
LAKELAND FL 33812

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
LAKELAND, FL 33812

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
MICHAEL OXFORD
2375 MILES CT.
LAKELAND FL 33812 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
☒ Change ☐ Addition
LAKELAND, FL 33812

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:

[Signature]

RONALD A. REYCRAFT

04/12/07

863-644-9087

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #