2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2009
Secretary of State

DOCUMENT# N96000000662

Entity Name: THE VILLAS AT COUNTRY CREEK III HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKES DRIVE SUITE 04
FORT MYERS, FL 33913 US

New Principal Place of Business:

Current Mailing Address:

C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKES DRIVE SUITE 04
FORT MYERS, FL 33913 US

New Mailing Address:

FEI Number: 65-0687432 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NASSOIY, SHERRY
C/O CORNERSTONE ASSOCIATION MANAGEMENT INC
11940 FAIRWAY LAKES DR. SUITE 04
FORT MYERS, FL 33913 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:	DVP	( ) Delete
Name:	MELIOUS, NORM	
Address:	20623 COUNTRY BARN DR.	
City-St-Zip:	ESTERO, FL 33928	
Title:	DP	( ) Delete
Name:	KUGLITSCH, JACOB	
Address:	20617 COUNTRY BARN DRIVE	
City-St-Zip:	ESTERO, FL 33928	
Title:	DT	( ) Delete
Name:	LACHOWITZER, ARVERD	
Address:	20630 COUNTRY BARN DR	
City-St-Zip:	ESTERO, FL 33928	
Title:	DS	( ) Delete
Name:	ALEXANDER, FRANK	
Address:	20637 CANDLEWOOD HOLLOW	
City-St-Zip:	ESTERO, FL 33928	
Title:	D	( ) Delete
Name:	WARD, PHIL	
Address:	US 4360 A MARIN WOODS	
City-St-Zip:	PORT CLINTON, OH 43452 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SHERRY NASSOIY RA 04/25/2009
Electronic Signature of Signing Officer or Director — Date