

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003891

FILED
Apr 20, 2009
Secretary of State

Entity Name: EAGLE CREEK TOWNHOMES HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

953 UNIVERSITY DR
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

953 UNIVERSITY DR
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 65-0539212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITTLE, JOHN
953 UNIVERSITY DR
CORAL SPRINGS, FL 33071 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: T () Delete
Name: BURNS, HELENE
Address: 11872 ROYAL PALM BLVD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP () Delete
Name: ZIRPOLY, KATHY
Address: 11852 ROYAL PALM BLVD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: P () Delete
Name: ROSENBERG, MARK
Address: 11888 ROYAL PALM BLVD
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: BURNS, HELENE
Address: 11872 ROYAL PALM BLVD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VPD (X) Change () Addition
Name: SOTO, MICHELLE
Address: 11880 ROYAL PALM BLVD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: PD (X) Change () Addition
Name: ROSENBERG, MARK
Address: 11888 ROYAL PALM BLVD
City-St-Zip: CORAL SPRINGS, FL 33065

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: MARK ROSENBERG

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date