

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004564

FILED
Apr 28, 2009
Secretary of State

Entity Name: COLLIER CREEK ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

774 HOLDEN AVE
SEBASTIAN, FL 32958

New Principal Place of Business:

774 HOLDEN AVE
SEBASTIAN, FL 32958 US

Current Mailing Address:

P.O. BOX 780305
SEBASTIAN, FL 329780305

New Mailing Address:

645 CLASSIC CT.
STE. 104
MELBOURNE, FL 32940 US

FEI Number: 65-1016894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPACE COAST PROPERTY MANAGEMENT
645 CLASSIC COURT
SUITE #104
MELBOURNE, FL 32940 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: V () Delete
Name: HALL, PATRICK
Address: 774 HOLDEN AVE
City-St-Zip: SEBASTIAN, FL 32958

Title: P () Delete
Name: MARTIN, ROBERT
Address: 744 HOLDEN AVE
City-St-Zip: SEBASTIAN, FL 32958

Title: T () Delete
Name: JOHNSON, ROBERT
Address: 741 S. EASY ST.
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARKER, RICHARD
Address: 838 CAIN ST
City-St-Zip: SEBASTIAN, FL 32958 US

Title: VP (X) Change () Addition
Name: MEYERS, FRANCO
Address: 744 HOLDEN AVE
City-St-Zip: SEBASTIAN, FL 32958

Title: T (X) Change () Addition
Name: JOHNSTON, JOHN
Address: 747 S. EASY ST.
City-St-Zip: SEBASTIAN, FL 32958

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: JOHN JOHNSTON

T

04/28/2009

Electronic Signature of Signing Officer or Director

Date