

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002012

FILED
Feb 05, 2010
Secretary of State

Entity Name: CROSSTOWN CENTER ASSOCIATION, INC.

Current Principal Place of Business:

5405 CYPRESS CENTER DRIVE
SUITE 240
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

C/O DEAKIN PROPERTY SERVICES, LLC
2909 W BAY TO BAY BLVD, STE 108
TAMPA, FL 33629

New Mailing Address:

FEI Number: 59-3571533 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: DP
Name: BURD, KYLE
Address: 5405 CYPRESS CENTER DRIVE, STE 240
City-St-Zip: TAMPA, FL 33609

Title: DVP
Name: BUNCH, KEVIN
Address: 5405 CYPRESS CENTER DRIVE, STE 240
City-St-Zip: TAMPA, FL 33609

Title: DST
Name: THOMAS, KEVIN
Address: 512 E WASHINGTON STREET
City-St-Zip: ORLANDO, FL 32801

Title: D
Name: PECORARO, JOEL
Address: 9927 DELANEY LAKE DRIVE
City-St-Zip: TAMPA, FL 33619

I hereby 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 all other like empowered.

SIGNATURE: KEVIN THOMAS

DST

02/05/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date