

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006051

Entity Name: CROSS CREEK II MASTER ASSOCIATION, INC.

Current Principal Place of Business:

16609 ROUND OAK DRIVE
TAMPA, FL 33618

Current Mailing Address:

P.O. BOX 342069
TAMPA, FL 33694-2069 US

FEI Number: 59-3293256

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRISCIA, FRANCIS EESQ
5550 WEST EXECUTIVE DR
STE 250
TAMPA, FL 33609 US

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

Officer/Director Detail :

Title PRESIDENT
Name BOWERS, ALBREN
Address PO BOX 342069
City-State-Zip: TAMPA FL 33694-2069

Title DIRECTOR
Name SCHIANO, MICHAEL
Address PO BOX 342069
City-State-Zip: TAMPA FL 33694-2069

Title TREASURER
Name BOWERS, ALBREN
Address P.O. BOX 342069
City-State-Zip: TAMPA FL 33694-2069

Title SECRETARY
Name SAPNAS, LYNN
Address P.O. BOX 342069
City-State-Zip: TAMPA FL 33694-2069

Title DIRECTOR
Name FLICKINGER, LANCE
Address P.O. BOX 342069
City-State-Zip: TAMPA FL 33694-2069

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: ALBREN BOWERS

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04/04/2024

Electronic Signature of Signing Officer/Director Detail

Date