OFFICIAL RECORDS REQUEST FORM

To: Board of Directors of Cross Creek Homeowners Association

As a Homeowner and Member of the Homeowners Association and pursuant to S.720.303(4) Florida Statutes, undersigned hereby requests to inspect and copy the following official records of the As

| the Association: | • | | |
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| 3. <u> </u> | | | |
| certified mail to be made availab board or its des working days a | o the address below. Flo ble to a homeowner with signee." Further, "The | orida law requires that "Th hin 10 working days after failure of an association t | Statues, and has been sent via the records of the association shall receipt of written request by the to provide the records within 10 rebuttable presumption that the |
| - | J | appointment to review the next 10 days. Thank you | e records requested above. I will |
| Signature: | | | |
| Printed Name: _ | | | |
| Address: | | | |
| Phone Number: | ; | Date: | |
| Mail To: | | | |
| Cross Creek Ho | omeowners Association | of DeLand | |
| 1577 Corner Cr | ossing | | |
| DeLand, FL 32 | 720 | | |