


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 31, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # 708995**  
 1. Entity Name  
 CRESCENT MANOR CONDOMINIUM, INC.



Principal Place of Business  
 411 SOUTH CRESCENT DRIVE  
 HOLLYWOOD, FL 33021

Mailing Address  
 411 SOUTH CRESCENT DRIVE  
 HOLLYWOOD, FL 33021

**DO NOT WRITE IN THIS SPACE**



01052005 No Chg-NP CR2E037 (10/03)

4. FEI Number  
 59-1207489 Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CALDERIN, CAROLE  
 411 SOUTH CRESCENT DRIVE, #103  
 HOLLYWOOD, FL 33021

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE Carole Calderin 1/28/05  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SCHIANO, ANTHONY
STREET ADDRESS	411 S CRESCENT DR #102
CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	VP
NAME	CLEVINGER, ROBERT
STREET ADDRESS	411 S CRESCENT DR #204
CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	STD
NAME	CALDERIN, CAROLE
STREET ADDRESS	411 SOUTH CRESCENT DRIVE #103
CITY-ST-ZIP	HOLLYWOOD FLA, 33021
TITLE	D
NAME	JACOBS, ANNA
STREET ADDRESS	411 S CRESCENT DR # 105
CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	D
NAME	JACOBS, RICHARD
STREET ADDRESS	411 S. CRESENT DR. #201
CITY-ST-ZIP	HOLLYWOOD, FL 33021
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

LU0010207626  
 02/01/05-80053-010 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carole Calderin SECRETARY 1/28/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #