


FILE NOW: FILING FEE IS \$61.25

FILED

**Mar 30 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 710217 (1)

1. Corporation Name
CRYSTAL LAKE 3930 ASSOCIATION INC. (A CONDOMINIUM ASSOCIATION)



Principal Place of Business 3930 CRYSTAL LAKE DRIVE #107 POMPANO BEACH FL 33064 US	Mailing Address C/O BUCK 2900 E. OAKLAND PARK BLVD. STE 103 FORT LAUDERDALE FL 33306 US
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3. Date Incorporated or Qualified 01/18/1966	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
4. FEI Number 58-1534011		
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**BUCK, DAVID E
2900 EAST OAKLAND PARK BLVD.
FORT LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

81 Name PAUL LEVINE

82 Street Address (P.O. Box Number is Not Acceptable)
661 HOLLOWS CIRCLE

83

84 City DEERFIELD BEACH **FL** **85** Zip Code 33442

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE [Signature] DATE 3-23-98

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE TD	<input type="checkbox"/> DELETE	1.1 TITLE D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BOOKSTEIN, IRVING		1.2 NAME BOOKSTEIN, IRVING	
STREET ADDRESS 3930 CRYSTAL LAKE DR., #205		1.3 STREET ADDRESS 3930 CRYSTAL LAKE DR #205	
CITY-ST-ZIP POMPANO BEACH FL		1.4 CITY-ST-ZIP POMPANO BEACH, FL 33064	
TITLE SD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BAGELY, DUANE		2.2 NAME PITTMAN, WAYNE R.	
STREET ADDRESS 3930 CRYSTAL LAKE DR., #215		2.3 STREET ADDRESS 3930 CRYSTAL LAKE DR. # 110	
CITY-ST-ZIP POMPANO BEACH FL		2.4 CITY-ST-ZIP POMPANO BEACH, FL 33064	
TITLE D	<input checked="" type="checkbox"/> DELETE	3.1 TITLE SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CONNER, FRANCES		3.2 NAME FISHER, RALPH	
STREET ADDRESS 3930 CRYSTAL LAKE DRIVE STE 101		3.3 STREET ADDRESS 3930 CRYSTAL LAKE DR. # 104	
CITY-ST-ZIP POMPANO BEACH FL		3.4 CITY-ST-ZIP POMPANO BEACH, FL 33064	
TITLE V	<input checked="" type="checkbox"/> DELETE	4.1 TITLE TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME DUBE, RENE A		4.2 NAME MILNE, MARY	
STREET ADDRESS 3930 CRYSTAL LAKE DR., #116		4.3 STREET ADDRESS 3930 CRYSTAL LAKE DR. # 203	
CITY-ST-ZIP POMPANO BEACH FL		4.4 CITY-ST-ZIP POMPANO BEACH, FL 33064	
TITLE P	<input checked="" type="checkbox"/> DELETE	5.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BAGELY, LIL		5.2 NAME MILLS, ROBERT	
STREET ADDRESS 3930 CRYSTAL LAKE DR., #201		5.3 STREET ADDRESS 3930 CRYSTAL LAKE DR. #202	
CITY-ST-ZIP POMPANO BEACH FL		5.4 CITY-ST-ZIP POMPANO BEACH, FL 33064	
TITLE <input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: [Signature] DATE: 2-12-98 (954) 429-3537

CR2E037 (10/97)