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Feb 13 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 713958 (7)

1. Corporation Name

CRYSTAL HOUSE CONDOMINIUM, INC.

Principal Place of Business

4200 CRYSTAL LK DR
POMPANO BCH FL 33064-1239

Mailing Address

4200 CRYSTAL LK DR
POMPANO BCH FL 33064-12913. Date Incorporated or Qualified
01/17/19683a. Date of Last Report
02/19/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-1674348

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

MOORE, IDA
4200 CRYSTAL LAKE DRIVE
#115
POMPANO BCH FL 33064

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME LLEWELLYN, DOLORES
STREET ADDRESS 4200 CRYSTAL LAKE DR
CITY-ST-ZIP POMPANO BEACH FL ☐ DELETETITLE DV
NAME SWARBRICK, MARIE
STREET ADDRESS 4200 CRYSTAL LAKE DR
CITY-ST-ZIP POMPANO BEACH FL ☐ DELETETITLE DT
NAME SINGER, THERESA
STREET ADDRESS 4200 CRYSTAL LAKE DRIVE
CITY-ST-ZIP POMPANO BEACH FL ☐ DELETETITLE DS
NAME MOORE, IDA
STREET ADDRESS 4200 CRYSTAL LAKE DR
CITY-ST-ZIP POMPANO BEACH FL ☐ DELETETITLE D
NAME ROBERTSON, MARGARET
STREET ADDRESS 4200 CRYSTAL LAKE DR
CITY-ST-ZIP POMPANO BEACH FL ☒ DELETETITLE D
NAME YOUNG, HELEN
STREET ADDRESS 4200 CRYSTAL LAKE DR
CITY-ST-ZIP POMPANO BEACH FL ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE D ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE D ☐ Change ☒ Addition
5.2 NAME SANDLEY, LOUISE
5.3 STREET ADDRESS 4200 CRYSTAL LAKE DR.
5.4 CITY-ST-ZIP POMPANO BEACH FL6.1 TITLE DT ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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: Ida M. Mortham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR2/5/97 954-946-6196
Date Daytime Phone # 0022049

CR2E037 (9/96)