

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715538

FILED  
Feb 15, 2011  
Secretary of State

**Entity Name:** CRYSTAL SANDS OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6300 MIDNIGHT PASS RD.  
SARASOTA, FL 34242

**New Principal Place of Business:**

**Current Mailing Address:**

6300 MIDNIGHT PASS RD.  
SARASOTA, FL 34242

**New Mailing Address:**

FEI Number: 59-1348752

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PAPANEK, MICHAEL S  
6300 MIDNIGHT PASS RD  
SARASOTA, FL 34242 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: VALE, KAREN  
Address: 6300 MIDNIGHT PASS RD  
City-St-Zip: SARASOTA, FL 34242

Title: PD  
Name: HACKER, HANK  
Address: 12870 CANYON CREEK BLVD  
City-St-Zip: FORT WAYNE, IN 46845

Title: TD  
Name: LEWIS, HAL  
Address: 3412 LAWTON LN  
City-St-Zip: PEPPER PIKE, OH 44124

Title: VP  
Name: BARSALOU, DONALD  
Address: 154 WOODBRIDGE ST  
City-St-Zip: SOUTH HADLEY, MA 01075

Title: S  
Name: DERR, OFELIA  
Address: P.O. BOX 200577  
City-St-Zip: AUSTIN, TX 78720

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: HANK HACKER

PD

02/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date