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**Secretary of State**

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0042476

NONPROFIT  
 CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 723465**

1. Corporation Name

**CRESTHAVEN VILLAS NO. 25 CONDOMINIUM, INC.**

Principal Place of Business

2567 DUDLEY DR W  
 VILLA A  
 WEST PALM BCH FL 33415  
 US

Mailing Address

2567 DUDLEY DR W  
 VILLA A  
 WEST PALM BCH FL 33415  
 US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

05/22/1972

4. FEI Number

59-2488395

Applied For  
 Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Election Campaign Financing

Trust Fund Contribution

**\$5.00** May Be  
 Added to Fees

9. Name and Address of Current Registered Agent

**ANITA ZUCKERMAN**  
**2523 DUDLEY DR W**  
**VILLA A**  
**WEST PALM BCH FL 33415**

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  DELETE

**P**  
**ANITA ZUCKERMAN**  
**2523 DUDLEY DR W, VILLA A**  
**W PALM BCH FL**

TITLE  DELETE

**T**  
**JEAN A DUBY**  
**2567 DUDLEY DR W, VILLA A**  
**W PALM BCH, FL 00000 33415**

TITLE  DELETE

**S**  
**CATANIA, ANNA**  
**2592 DUDLEY DR E #E**  
**W PALM BCH, FL 00000**

TITLE  DELETE

**VP**  
**SALVATORE BRUCALERI**  
**2511 DUDLEY DR W, VILLA B**  
**W PALM BCH FL 33415**

TITLE  DELETE

**D**  
**SELMA OPPENHEIM**  
**2580 DUDLEY DR E, VILLA F**  
**W PALM BCH FL 33415**

TITLE  DELETE

**D**  
**VITA KARWOSKI**  
**2532 DUDLEY DR E, VILLA A**  
**W PALM BCH, FL 00000 33415**

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-ZIP

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

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, with all other like empowered.

SIGNATURE:

*Signature*  
 SIGNATURE REQUIRED  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/99 (56) 433-5037  
 Date Daytime Phone #

CR2E037-(1/1/98)