


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 07, 2008 8:00 am**  
**Secretary of State**

04-07-2008 90062 046 \*\*\*\*70.00

DOCUMENT # N96000006245			
1. Entity Name CRESTHAVEN CIVIC ASSOCIATION, INC.			
Principal Place of Business 3500 NE 16 TERRACE POMPANO BEACH, FL 33064		Mailing Address 1360 NE 25TH COURT POMPANO BEACH, FL 33064	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>1364 NE 25th Court</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <i>Pompano Beach, FL</i>	
Zip	Country	Zip <i>33064</i>	Country <i>BROWARD</i>
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
FRENDAHL, BRUCE 1460 NE 32 ST POMPANO BEACH, FL 33064		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee Is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FEINBERG, ANDY 1440 NE 32ND PLACE POMPANO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SARAH BROWN 1364 NE 25th Court POMPANO BEACH, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PPD SPENCE, DAVE 1240 NE 33RD COURT POMPANO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PPD JOHN MEARD 1417 NE 26th Court POMPANO BEACH, FL 33064 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SPENCE, DIANA M 1240 NE 33 COURT POMPANO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ELINOR DAYTON 1660 NE 30th COURT POMPANO BEACH, FL 33064 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FS FEINBERG, BARBARA 1440 NE 32 PLACE POMPANO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Feinberg, Andy 1440 NE 32nd Place Pompamo Beach, FL 33064 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP REUWER, MARK 2921 NE 11 TERR POMPANO BEACH, FL 33064 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Parl. DeCucco, Douglas 3230 NE 9th TERRACE Pompamo Beach FL 33064 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RSD BROWN, SARAH 1364 NE 25 CT POMPANO BEACH, FL 33064 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	541A REUWER, ELLEN 2921 NE 11 TERRACE POMPANO BEACH, FL 33064 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <i>Elinor Dayton, Treasurer</i>		Date: <i>3/28/08</i> Daytime Phone #: <i>954-942-0854</i>	