

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 09, 2006
Secretary of State**

DOCUMENT# N97000002170

Entity Name: CRESTVIEW CONDOMINIUMS OF ORLANDO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST S.R. 434
SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 WEST S.R. 434
SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-3440483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W
2180 WEST S.R. 434
SUITE 5000
LONGWOOD, FL 32779 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: PD () Delete
Name: CHAMBERS, CAROL
Address: 7135-236 YACHT BASIN AVE.
City-St-Zip: ORLANDO, FL 32835

Title: VPD () Delete
Name: NYSTOM, INGRID R
Address: 7135-228 YACHT BASIN AVE
City-St-Zip: ORLANDO, FL 32835

Title: SD () Delete
Name: DILLON, STEPHANIE
Address: 7109-425 YACHT BASIN AVE.
City-St-Zip: ORLANDO, FL 32835

Title: TD (X) Delete
Name: CLIPP, MARK
Address: 7109-419 YACHT BASIN AVE
City-St-Zip: ORLANDO, FL 32835

Title: D (X) Delete
Name: RODRIGUEZ, ROLANDO
Address: 7109-429 YACHT BASIN AVE
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CAROL CHAMBERS

PD

03/09/2006

Electronic Signature of Signing Officer or Director

Date