

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N03174** (2)
1. Corporation Name
CRYSTAL LAKE VILLAS CONDOMINIUM ASSOCIATION, INC

Principal Place of Business 8855 SW 27TH STREET MIAMI FL 33165	Mailing Address 8855 SW 27TH STREET MIAMI FL 33165
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3. Date Incorporated or Qualified 05/18/1984	
4. FEI Number 65-0673303	Applied For Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LEONARDO, JOSE J., ESO.
12515 N KENDALL DRIVE
222
MIAMI FL 33186**

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CURBELO, ROBERTO, JR.	1.2 NAME	
STREET ADDRESS	8855 SW 27TH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33165	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUEZ, OSVALDO	2.2 NAME	
STREET ADDRESS	8855 SW 27TH ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33165	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUEZ, HUMBERTO JULIO	3.2 NAME	
STREET ADDRESS	8855 SW 27TH ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33165	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: *Julio Rodriguez*

3/6/98 (305) 385-2627

CR2E037 (10/97)