2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2004 8:00 am
Secretary of State
02-18-2004 90016 028 ****61.25

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MOORE CR2E037 (11/03)

DOCUMENT # 711972

1. Entity Name

CRESTHAVEN VILLAS NO. 2 CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
2885 ASHLEY DR E H WEST PALM BEACH FL 33415 US	2885 ASHLEY DR E H WEST PALM BEACH FL 33415 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2641316 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GLADYS, EPSTEIN
2781 ASHLEY DR
WEST PALM BEACH FL 33415

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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 EPSTEIN, GLADYS 2781 ASHLEY DR E F WEST PALM BEACH FL 33415	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P COLUCCI, SANTO 2846 ASHLEY DR. WEST F WEST PALM BEACH FL 33415	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DIMMICK, PAT 2796 ASHLEY DR E F WEST PALM BEACH FL 33415	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SHULTZ, PATRICA 2817 ASHLEY DR. EAST F WEST PALM BEACH, FL 33415	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HERSHEY, JEAN 2781 AHSLEY DR. EAST WEST PALM BEACH FL 33415	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC WORDEN, LINDEN 2811 ASHLEY DR EAST H WEST PALM BEACH FL 33415	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WOODHALL, GLADYS 2781 ASHLEY DR EE W. PALM BCH FL 33415	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREAS WOODHALL, GLADYS 2781 ASHLEY DR EAST E WEST PALM BEACH FL 33415	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SULLIVAN, DORIS 2830 ASHLEY DR E. WEST PALM BEACH FL 33415	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GORMLY, MARY 2846 ASHLEY DR EAST E WEST PALM BEACH FL 33415	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOWARD, KIRBY 2846 ASHELY DR., E WEST PALM BEACH FL 33415	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KENNEDY, JOSPHINE 2846 ASHLEY DR. WEST J WEST PALM BEACH FL 33415	☐ Change ☒ Addition

12. 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 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: Gladys E. Woodhall GLADYS E WOODHALL 2-25-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #