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

## Secretary of State **DOCUMENT # 720944** 1. Entity Name 08-02-2004 90012 040 \*\*\*\*61.25 CRESTHAVEN VILLAS NO. 20 CONDOMINIUM, INC. Principal Place of Business Mailing Address C/O CROSLEY MASTER ASSOCIATION 2889 CROSLEY DRIVE EAST C/O CROSLEY MASTER ASSOCIATION 2889 CROSLEY DRIVE EAST 44051161 WEST PALM BEACH FL 33415-8418 WEST PALM BEACH FL 33415-8418 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (4/04) 4. FEI Number Applied For City & State City & State 59-2041355 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BORGES - REYNALDO Street Address (P.O. Box Number is Not Acceptable) CROSLEY RECREATION CENTER 2889 CROSLEY DRIVE WEST PALM BEACH FL 33415 City Zip Code FL 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** Stonature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By September 8, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11 VPD TITLE ☐ Delete TITLE **Change** ■ Addition ANTHONY SMITH SMITH, ANTHONY NAME NAME 2945-O CROSLEY DR WEST 2945-A CROSLEY DR. WEST STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33415 CITY-ST-7IP CITY-ST-7IP PALM BOACH FL 33415 TITLE □ Delete TITLE Addition LEWIS, EVELYN NAME NAME 2935-K CROSLEY DR W STREET ADDRESS STREET ADDRESS W. PALM BEACH FL CITY-ST-ZIP CITY-ST-ZIP \_\_\_\_ Change TITLE THLE Delete COOPER RHODA 2945-B CROSCET DR WEST WEST, BETTY NAME 2941-B CROSLEY DRIVE WEST STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33415 WEST PALM BÉACH FL 33415 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition Delete VANCE, RITA NAME NAME 2901-J CROSLEY DR WEST STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition POYNER, JEAN NAME NAME 2895-H CRÖSLEY DR W STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33415 CITY-ST-ZIP CITY-ST-ZIP TITLE **X** Delete ELVIRA NOEL 2941-B CROSKEY DR WEST HELD, BOB NAME NAME 2901 N. CROSLEY DR W STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33415. CITY-ST-ZIP CITY-ST-ZIP

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.

12. Thereby 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

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

7/28/04

965-1496 Dayting Phone #

FILED

Aug 02, 2004 8:00 am