## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000008532

FILED Mar 26, 2009 Secretary of State

Entity Name: THE PRESERVE AT CRESTWOOD HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

ASSOCIATED PROPERTY MGMT. 1928 LAKE WORTH RD LAKE WORTH, FL 33461

Current Mailing Address: New Mailing Address:

ASSOCIATED PROPERTY MGMT. 1928 LAKE WORTH RD LAKE WORTH, FL 33461

FEI Number: 75-3029649 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FUCHS, LAWRENCE 590 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411 US

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MACMILLAN, JOHN

Address: 218 PRESERVE CT
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: V () Delete

Name: PARREIRA, FRANCISCO Address: 223 PRESERVE CT

City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: ST ( ) Delete
Name: KORBELAK, CHRISTOPHER

Address: 200 PRESERVE CT.

City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: P (X) Change ( ) Addition

Name: MACMILLAN, JOHN P

Address: 218 PRESERVE CT

City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: VT (X) Change ( ) Addition Name: PARREIRA, FRANCISCO VT

Address: 223 PRESERVE CT

City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: S (X) Change ( ) Addition Name: KORBELAK, CHRISTOPHER S

Address: 200 PRESERVE CT.

City-St-Zip: ROYAL PALM BEACH, FL 33411

I hereby certify that the information supplied with this filing does not qualify 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: JOHN MATH, APM AGT 03/26/2009