FILED 2003 NOT-FOR-PROFIT CORPORATION Mar 31, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR) Secretary of State DOCUMENT # N29149** 03-31-2003 90117 012 ****61.25 CROWN POINT SPRINGS HOMEOWNERS' ASSOCIATION, INC Principal Place of Business Mailing Address **00003010** 225 S WESTMONTE DRIVE P.O. BOX 161606 ALTAMONTE SPRINGS FL 32716 STE 2050 ALTAMONTE SPRINGS FL 32714 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 59-2917661 City & State City & State Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WOMACK, ELLEN R

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.

City

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

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

FILE NOW: FEE IS \$61.25		Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS		11.		S TO OFFICERS AND DIRECTORS IN 10	
TITLE	DT	Delete	TITLE	DVP	☐ Change 🗘 Addition	
NAME	JELT, WALTER	^	NAME	Keith Timb	es proprie	
STREET ADDRESS	1426 SPRING RIDGE DR		STREET ADDRESS	1624 W. SO	es Ridge Circle	
CITY-ST-ZIP	WINTER GARDENS FL 34787		CITY-ST-ZIP	Winter Ga		
TITLE	DVP	Delete	TITLE	7 3	Change Addition	
NAME	ARNDT, JEFF	/ >	NAME	Paul Johns	tand 1	
STREET ADDRESS	1438 W SPRING RIDGE CIR		STREET ADDRESS	1087 Depot	Court	
CITY-ST-ZIP	WINTER GARDEN FL		CITY-ST-ZIP	Winter Ga	rden. FL 34787	
TITLE	DP	Delete	TITLE		Change Addition	
NAME	BROWN, ROGER		NAME			
STREET ADDRESS	1009 AUTUMN LEAF CT.		STREET ADDRESS		i	
CITY-ST-ZIP	WINTER GARDEN FL 34787		CITY-ST-ZIP			
TITLE	D	☐ Delete	TITLE	DT	Change 🔲 Addition	
NAME	MOTTO, YVONNE D		NAME		`	
STREET ADDRESS	1440 E SPRING RIDGE CIRCLE		STREET ADDRESS			
CITY-ST-ZIP	WINTER GARDEN FL 34787		CITY-ST-ZIP			
TITLE	D	Delete	TITLE	2 1 2	Change Addition A Loop Way RDEN, FL34787 Change Addition	
NAME	MILLER, JACK	N	NAME	Frank 109/	larph,	
STREET ADDRESS	1014 SPRING LOOP WAY		STREET ADDRESS	1410 >prin	ig LOOP WAY	
CITY-ST-ZIP	WINTER GARDEN FL		CITY-ST-ZIP	WINTERGA	RDEN, FL34787	
TITLE		☐ Delete	TITLE	$\mathcal{P}_{m} = m l$	☐ Change Addition	
NAME	, ·		NAME	millar aMCK	inney.	
STREET ADDRESS			STREET ADDRESS	1019 Sovina	Landing	
CITY, ST., 7(P			CITY_ST_7IP	レス・ヘエ・ア・グ・フ	7. 54 -11707	

WINTER GARAEN 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:

225 S WESTMONTE DRIVE

ALTAMONTE SPRINGS FL 32714

STE 2050

407-656-9578

Applied For

Zip Code

Not Applicable