2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711972

Entity Name: CRESTHAVEN VILLAS NO. 2 CONDOMINIUM, INC.

FILED
Mar 19, 2020
Secretary of State
1613767906CC

Current Principal Place of Business:

2885 ASHLEY DR E

WEST PALM BEACH, FL 33415

Current Mailing Address:

2885 ASHLEY DR E

WEST PALM BEACH. FL 33415 US

FEI Number: 59-2641316 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORTES, DONNA 2885 ASHLEY DR E

WEST PALM BEACH, FL 33415 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: DONNA CORTES 03/19/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR Title

NameHANNA, NERMINENameCORTES, DONNAAddress2846 ASHLEY DR WAddress9433 PALOMINO DR

APT. D City-State-Zip: LAKE WORTH FL 33467

City-State-Zip: WEST PALM BEACH FL 33415

 Title
 PRESIDENT
 Title
 DIRECTOR

 Name
 WARD, MARK
 Name
 MAY, ROBERT

 Address
 2830 ASHLEY DR W

Address 2811 ASHLEY DR E Address 2830 ASHLEY DR W

APT. E

City-State-Zip: WEST PALM BEACH FL 33415

Title DIRECTOR Title SECRETARY

Name BALL, JOAN

Address 2796 ASHLEY DR

Title SECRETARY

Name CORTES, DONNA

Address 9433 PALOMINO DR

APT. H City-State-Zip: LAKE WORTH FL 33467

City-State-Zip: WEST PALM BEACH FL 33415

Title VP

Name COONEY, JEAN
Address 2800 ASHLEY DR. E

APT D

City-State-Zip: WEST PALM BEACH FL 33415

I hereby 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 all other like empowered.

SIGNATURE: DONNA CORTES TREAS/SEC 03/19/2020

Electronic Signature of Signing Officer/Director Detail

Date