

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25630

**FILED**  
**Apr 26, 2013**  
**Secretary of State**  
**CC8367865835**

**Entity Name:** CRYSTAL GLEN PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2541 N RESTON TERRACE  
HERNANDO, FL 34442

**Current Mailing Address:**

2541 N RESTON TERRACE  
HERNANDO, FL 34442 US

**FEI Number:** 59-2929757

**Certificate of Status Desired:** No

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

VILLAGES SERVICES COOPERATIVE INC  
2541 N RESTON TERRACE  
HERNANDO, FL 34442 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:** GERI BOND

04/26/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TD  
Name MURPHY, MARILYN  
Address 1145 S. SOFTWIND LOOP  
City-State-Zip: LECANTO FL 34461

Title PD  
Name EGNOT, RON  
Address 1423 S. CHATSWORTH PT.  
City-State-Zip: LECANTO FL 34461

Title VPD  
Name MILLER, WILLIAM  
Address 3932 W. FEATHEREDGE CT.  
City-State-Zip: LECANTO FL 34461

Title VP, DIRECTOR  
Name FABER, LES  
Address 1189 S. FIELDVIEW LOOP  
City-State-Zip: LECANTO FL 34461

Title SECRETARY, DIRECTOR  
Name BOYER, DAVID  
Address 3843 W. NORTHCREST CT.  
City-State-Zip: LECANTO FL 34461

*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:** MARILYN MURPHY

**TREASURER**

04/26/2013

Electronic Signature of Signing Officer/Director Detail

Date