

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000091

Entity Name: CRESCENT PARK HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**HARA COMMUNITY 1ST ADVISORS
760 FLORIDA CENTRAL PKWY #200
LONGWOOD, FL 32750**Current Mailing Address:**C/O HARA COMMUNITY 1ST ADVISORS
760 FLORIDA CENTRAL PKWY #200
LONGWOOD, FL 32750 US**FEI Number:** 59-3308141**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARA COMMUNITY 1ST ADVISORS, LLC
760 FLORIDA CENTRAL PKWY #200
LONGWOOD, FL 32750 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:** LORIE FULKES

04/25/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name TALBOT, LAURIE H
Address C/O HARA COMMUNITY 1ST
ADVISORS
760 FLORIDA CENTRAL PKWY #200
City-State-Zip: LONGWOOD FL 32750

Title TREASURER
Name EATON, JOANN M
Address C/O HARA COMMUNITY 1ST
ADVISORS
760 FLORIDA CENTRAL PKWY #200
City-State-Zip: LONGWOOD FL 32750

Title DIRECTOR
Name CAVELLERI, ROBERT J
Address C/O HARA COMMUNITY 1ST
ADVISORS
760 FLORIDA CENTRAL PKWY #200
City-State-Zip: LONGWOOD FL 32750

Title SECRETARY
Name DOUGHTON, KAREN D
Address C/O HARA COMMUNITY 1ST
ADVISORS
760 FLORIDA CENTRAL PKWY #200
City-State-Zip: LONGWOOD FL 32750

Title VP
Name SCHUSTER, DENNIS H
Address C/O HARA COMMUNITY 1ST
ADVISORS
760 FLORIDA CENTRAL PKWY #200
City-State-Zip: LONGWOOD FL 32750

Title DIRECTOR
Name HUTTO, LARYSA
Address C/O HARA COMMUNITY 1ST
ADVISORS
760 FLORIDA CENTRAL PKWY #200
City-State-Zip: LONGWOOD FL 32750

Title PRESIDENT
Name KINSCHERF, BARRY
Address C/O HARA COMMUNITY 1ST
ADVISORS
760 FLORIDA CENTRAL PKWY #200
City-State-Zip: LONGWOOD FL 32750

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: BARRY KINSCHERF

PRESIDENT

04/25/2019

Electronic Signature of Signing Officer/Director Detail

Date