


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90043 045 ****70.00

DOCUMENT # 709034

1. Entity Name
CRYSTAL LAKE 960 ASSOCIATION, INC., (A CONDOMINIUM ASSOCIATION)



Principal Place of Business
**960 CRYSTAL LAKE DRIVE
 DEERFIELD BEACH, FL 33064**

Mailing Address
**960 CRYSTAL LAKE DRIVE
 DEERFIELD BEACH, FL 33064**

40067750



2. Principal Place of Business - No P.O. Box #
960 Crystal Lake Drive

3. Mailing Address
 Suite, Apt. #, etc.

01052008 Chg-NP CR2E037 (12/06)

City & State
Deerfield Beach Florida

City & State
FL

Zip
33064

Country
USA

Zip
33064

Country
USA

4. FEI Number
59-1116673

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KEN VISE
 960 CRYSTAL LAKE DRIVE
 SUITE 215
 DEERFIELD BEACH, FL 33064**

7. Name and Address of New Registered Agent

Name
JOAN F. DARRIGO

Street Address (P.O. Box Number is Not Acceptable)
*BOARD OF DIRECTORS
 960 CRYSTAL LAKE DRIVE*

City
DEERFIELD BEACH **FL** Zip Code
33064

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.

SIGNATURE *Joan F. Darrigo* DATE *4-10-08*

Signature typed or printed name of registered agent not file if applicable. (NOTE: Registered Agent signature required when reappointing)

**Filing Fee is \$61.25
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

**Make check payable to
 Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'BRIEN, MILLIE 960 CRYSTAL LAKE DR. #204 DEERFIELD BEACH, FL 33064 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ROGERS, CHARLES 960 CRYSTAL LAKE DR #102 DEERFIELD BEACH, FL 33064 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DARRIGO, JOAN 960 CRYSTAL LAKE DR. #110 DEERFIELD BEACH, FL 33064 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P-T VISE, KEN 960 CRYSTAL LAKE DR. #215 DEERFIELD BEACH, FL 33064 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURPHY, KATHLEEN 960 CRYSTAL LAKE DR #103 DEERFIELD BEACH, FL 33064 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DARRIGO, PASQUALE 960 CRYSTAL LAKE DRIVE #110 DEERFIELD BEACH, FL 33064 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY-TREASURER JOAN F. DARRIGO 960 CRYSTAL LAKE DR #110 DEERFIELD BEACH FL 33064 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT KATHLEEN MURPHY 960 CRYSTAL LAKE DR #103 DEERFIELD BEACH FL 33064 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR BETTY ELLINGER 960 CRYSTAL LAKE DR #108 DEERFIELD BEACH FL 33064 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR JEAN ROGERS 960 CRYSTAL LAKE DR #102 DEERFIELD BEACH FL 33064 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Joan F. Darrigo (JOAN F. DARRIGO)* DATE: *4/10/08* DAYTIME PHONE #: *954-781-3990*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR