

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Dec 07, 2009
Secretary of State**

DOCUMENT# 709034

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

Current Principal Place of Business:

960 CRYSTAL LAKE DRIVE
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

960 CRYSTAL LAKE DRIVE
DEERFIELD BEACH, FL 33064

New Mailing Address:

FEI Number: 59-1116673 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DARRIGO, JOAN F
BOARD OF DIRECTORS
960 CRYSTAL LAKE DRIVE
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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: JOAN F. DARRIGO

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: O'BRIEN, MILLIE
Address: 960 CRYSTAL LAKE DR. #204
City-St-Zip: DEERFIELD BEACH, FL 33064

Title: V () Delete
Name: ROGERS, CHARLES
Address: 960 CRYSTAL LAKE DR #102
City-St-Zip: DEERFIELD BEACH, FL 33064

Title: D () Delete
Name: ELLINGER, BETTY
Address: 960 CRYSTAL LAKE DR #108
City-St-Zip: DEERFIELD BEACH, FL 33064

Title: D () Delete
Name: ROGER, JEAN
Address: 960 CRYSTAL LAKE DR #102
City-St-Zip: DEERFIELD BEACH, FL 33064

Title: ST () Delete
Name: DARRIGO, JOAN
Address: 960 CRYSTAL LAKE DR #110
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: DARRIGO, PASQUALE
Address: 960 CRYSTAL LAKE DRIVE #110
City-St-Zip: DEERFIELD BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: KATHLEEN MURPHY

P

12/07/2009

Electronic Signature of Signing Officer or Director

Date