


FILE NOW: FILING FEE IS \$61.25

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Apr 07, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 709366

1. Corporation Name
CRYSTAL COURT MANOR NO. 5 CONDOMINIUM, INC.

Principal Place of Business 1301 N. 12TH CT HOLLYWOOD FL 33019-3202	Mailing Address 1301 N. 12TH CT HOLLYWOOD FL 33019-3202
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21 Principal Place of Business	2a. Mailing Address 421 So. Fed'l Hwy	3. Date Incorporated or Qualified 07/29/1965
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc. DANIA FL	4. FEI Number 79-1669490
23 City & State	28 City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24 Zip	29 Zip 33004	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent DISHER, JEAN 1305 N. 12TH COURT HOLLYWOOD FL 33019	10. Name and Address of New Registered Agent 81 Name JACKIE PANNELL 82 Street Address (P.O. Box Number is Not Acceptable) 421 So. FEDERAL Hwy 83 84 City DANIA FL 85 Zip Code 33004
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 4/1/99

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD DISHER, J <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DISHER, J	1.2 NAME	
STREET ADDRESS	1305 N 12 CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33019	1.4 CITY-ST-ZIP	
TITLE	TD DISHER, JEAN <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DISHER, JEAN	2.2 NAME	
STREET ADDRESS	1301 N. 12TH CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33019-3202	2.4 CITY-ST-ZIP	
TITLE	PD MIELI, W <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIELI, W	3.2 NAME	
STREET ADDRESS	309SW 9TH AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	HALLANDALE FL 33009	3.4 CITY-ST-ZIP	
TITLE	VD BOULANNE, JEAN CL <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOULANNE, JEAN CL	4.2 NAME	
STREET ADDRESS	1301 N 12TH COURT	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	4.4 CITY-ST-ZIP	
TITLE	D EVANS, D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, D	5.2 NAME	
STREET ADDRESS	1301 N 12TH CT	5.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33019	5.4 CITY-ST-ZIP	
TITLE	J. PANNELL <input type="checkbox"/> DELETE	6.1 TITLE	TREAS. <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	421 So Fed'l Hwy	6.2 NAME	
STREET ADDRESS	DANIA FL	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE: 4/1/99 DAYTIME PHONE #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0023505 CR2E037 (1/98)