2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2008
Secretary of State

DOCUMENT# 710219

Entity Name: CRYSTAL LAKE 941 ASSOCIATION, INC. (A CONDOMINIUM ASSOCIATION)

Current Principal Place of Business:

941 CRYSTAL LAKE DR.
415
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

941 CRYSTAL LAKE DR.
415
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 59-1209047 **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:

HAROLD KARKER
941 CRYSTAL LAKE DR
APT 102
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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: KARKER, HAROLD PRES
Address: 941 CYRSTAL LAKE DR.#102
City-St-Zip: POMPANO BEACH, FL 33064

Title: VD ( ) Delete
Name: NILSSON, KRISTINE V.PRES
Address: 941 CRYSTAL LAKE DR #103
City-St-Zip: POMPANO BEACH, FL 33064

Title: TD ( ) Delete
Name: CORNAGLIA, ANDREA TREAS
Address: 941 CRYSTAL LAKE DR. #206
City-St-Zip: POMPANO BEACH, FL 33064

Title: D ( ) Delete
Name: SCALEA, JOHNATHAN
Address: 941 CRYSTAL LAKE DR #409
City-St-Zip: POMPANO BEACH, FL 33064

Title: D ( ) Delete
Name: STINSON, DAMON
Address: 941 CRYSTAL LAKE DR #404
City-St-Zip: POMPANO BEACH, FL 33064

Title: SD ( ) Delete
Name: POWERS, VICTORIA SEC
Address: 941 CRYSTAL LAKE DR #406
City-St-Zip: POMPANO 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
Name:
Address:
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: HAROLD KARKER PD 05/04/2008

Electronic Signature of Signing Officer or Director — Date