

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90040 007 ****61.25

DOCUMENT # 712063
 1. Entity Name
CRYSTAL COURT NO. 4 CONDOMINIUM, INC.



Principal Place of Business
 2621 & 2623 GRANT STREET
 HOLLYWOOD FL 33020

Mailing Address
 2621 GRANT ST
 #12-B
 HOLLYWOOD FL 33020

2. Principal Place of Business
 Suite, Apt. #, etc.

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

City & State

Zip Country

4. FEI Number **59-2397748**

Applied For
 Not Applicable

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



1st MOORE CR2E037 (10/04)

6. Name and Address of Current Registered Agent

GROSSINGER, YVES
 2621 GRANT ST.
 APT. 12B
 HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 *Robert Hauptert* **ROBERT HAUPERT** Director *April 4th, 2005*

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

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	T	<input checked="" type="checkbox"/> Delete
NAME	THIROBEAU, RAYMONDE	
STREET ADDRESS	2621 GRANT ST #12B	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GROSSINGER, YVES	
STREET ADDRESS	2621 GRANT ST #12B	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	P	<input type="checkbox"/> Delete
NAME	CANNIS, JERRY	
STREET ADDRESS	2623 GRANT ST #4A	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HAVAERT, ROBERT	
STREET ADDRESS	2623 GRANT ST #6-B	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	D	<input type="checkbox"/> Delete
NAME	CANNIS, ANTHONY	
STREET ADDRESS	2623 GRANT ST #3A	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	GONZALEZ, CARLOS	
STREET ADDRESS	2623 GRANT ST #5-A	
CITY-ST-ZIP	HOLLYWOOD FL 33020	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	S/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Prooms, Keniesha	
STREET ADDRESS	2621 Grant St #1A	
CITY-ST-ZIP	Hollywood FL, 33020	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hauptert, Robert	
STREET ADDRESS	2623 Grant St # 6B	
CITY-ST-ZIP	Hollywood FL 33020	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 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: *Robert Hauptert* **ROBERT HAUPERT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #