

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 08, 2009  
Secretary of State**

DOCUMENT# 712063

Entity Name: CRYSTAL COURT NO. 4 CONDOMINIUM, INC.

**Current Principal Place of Business:**

C/O WEST BROWARD COMM MGMT  
11530 STATE ROAD 84  
DAVIE, FL 33325 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O WEST BROWARD COMM MGMT  
11530 STATE ROAD 84  
DAVIE, FL 33325 US

**New Mailing Address:**

C/O WEST BROWARD COMM MGMT  
P O BOX 551390  
DAVIE, FL 33355

FEI Number: 59-2397748

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FIORE, ANGELA  
WEST BROWARD COMM MGMT  
11530 STATE ROAD 84  
DAVIE, FL 33325 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: P ( ) Delete  
Name: TORCHIA, KAREN  
Address: 4040 N. HILL DR., #39  
City-St-Zip: HOLLYWOOD, FL 33021

Title: S ( ) Delete  
Name: DOMINGUEZ, CRISSIE  
Address: 11011 SW 89TH DRIVE  
City-St-Zip: MIAMI, FL 33172

Title: T3 ( ) Delete  
Name: COUVILLION, MARK  
Address: 11923 SW 47TH STREET  
City-St-Zip: COOPER CITY, FL 33330

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: TORCHIA, KAREN  
Address: 17746 WOODVIEW TERRACE  
City-St-Zip: BOCA RATON, FL 33486

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

Title: T (X) Change ( ) Addition  
Name: COUVILLION, MARK  
Address: 11923 SW 47TH STREET  
City-St-Zip: COOPER CITY, FL 33330

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: KAREN TORCHIA

P

04/08/2009

Electronic Signature of Signing Officer or Director

Date