## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#713181** 

FILED Mar 23, 2009 Secretary of State

Entity Name: CRESCENT ARMS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2477 STICKNEY POINT RD., #118A SARASOTA, FL 34231 **Current Mailing Address: New Mailing Address:** 2477 STICKNEY POINT RD., #118A SARASOTA, FL 34231 FEI Number: 59-1234149 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARGUS PROPERTY MANAGEMENT 2477 STICKNEY POINT RD SUITE 118A SARASOTA, FL 34231 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LAUCIELLO, FRANK Name: Name: 6310 MIDNIGHT PASS RD #301 NORTH Address: Address: City-St-Zip: SARASOTA, FL 34242 City-St-Zip: Title: () Delete Title: () Change () Addition RETTICH, KATHY Name: Name: Address: 46 EAST MARKET ST Address: City-St-Zip: GERMANTOWN, OH 45327 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition ULRICH, RUTH ULRICH, RUTH Name: Name: 6312 MIDNIGHT PASS RD., #403S 6312 MIDNIGHT PASS RD., #403S Address: Address: City-St-Zip: SARASOTA, FL 34242 City-St-Zip: SARASOTA, FL 34242 Title: ( ) Delete Title: () Change () Addition Name: ZELSON, JOSEPH Name: 15444 WOODLAKE DR. Address: Address: City-St-Zip: CHESTERFIELD, MO 63017 City-St-Zip: Title: () Delete Title: () Change () Addition SCHALLER, PAUL Name: Name: 101 S MEADOW DR. Address: Address: City-St-Zip: ORCHARD PARK, NY 14127 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: RUTH ULRICH S 03/23/2009