2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715237

FILED Mar 02, 2009 Secretary of State

Entity Name: CRESTHAVEN VILLAS NO. 1 CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business:

2885 ASHLEY DRIVE E

WEST PALM BEACH, FL 33415 US

Current Mailing Address: New Mailing Address:

2885 ASHLEY DRIVE E

WEST PALM BEACH, FL 33415 US

FEI Number: 59-2350836 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:

BARTLETT, JOE MORGA, RONALD MGR 2885 ASHLEY DRIVE E 2885 ASHLEY DRIVE E

WEST PALM BEACH, FL 33415 US WEST PALM BEACH, FL 33415 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: RONALD MORGA 03/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: P (X) Change () Addition

 Name:
 SIMEINA, ALICE
 Name:
 HOUT, JOHN

 Address:
 4780 CRESTHAVEN BLVD. UNIT H
 Address:
 2760 ASHLEY DRIVE EAST, UNIT C

 City-St-Zip:
 W. PALM BEACH, FL 33415
 City-St-Zip:
 W. PALM BEACH, FL 33415

Title: T () Delete Title: T (X) Change () Addition

Name: REESE, JANICE Name: REESE, JANICE

Address: 4780 CRESTHAVEN BLVD. UNIT A Address: 4780 CRESTHAVEN BLVD., UNIT A City-St-Zip: W. PALM BEACH, FL 33415 City-St-Zip: W. PALM BEACH, FL 33415

 $\label{eq:title:P} {\sf Title:} \qquad {\sf P} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf VP} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

Name: HOUT, JOHN Name: SIMCINA, ALICE

 Address:
 2760 ASHLEY DR E-C
 Address:
 4780 CRESTHAVEN BLVD., UNIT H

 City-St-Zip:
 W. PALM BEACH, FL 33415
 City-St-Zip:
 W. PALM BEACH, FL 33415

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: JANICE REESE T 03/02/2009