


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90021 015 ****61.25

DOCUMENT # 716814			
1. Entity Name CRYSTAL COURT MANOR NO. 14 CONDOMINIUM, INC.			
Principal Place of Business 1550 NORTH 12 COURT HOLLYWOOD, FL 33019		Mailing Address 1550 N 12TH COURT 5B HOLLYWOOD, FL 33019 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc. <i>SAME</i>		Suite, Apt. #, etc. <i>SAME</i>	
City & State		City & State	
Zip		Zip	
Country		Country	
4. FEI Number 06-0095868		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
GIOIA, CONSTANCE <i>CONSTANCO</i> 1554 N 12TH COURT 5B HOLLYWOOD, FL 33019		Name Street Address (P.O. Box Number is not acceptable) <i>SAME</i> 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: <i>Constance Maria President Board of Directors</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: <i>3/12/08</i>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T AVANTI, RUDOLPH 1554 N 12TH CT #13B HOLLYWOOD, FL 33019 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASSISTANT TREASURER <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition AVANTI, RUDOLPH 1554 N. 12TH COURT #13B HOLLYWOOD, FL-33019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GIOIA, CONSTANCE 1550 NORTH 12TH CT. #5B HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HOSIER, MARYANN 1554 N 12TH CT 9A HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LAWLOR, RICHARD 1550 N. 12TH CT., 3B HOLLYWOOD, FL 33019 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY/TREASURER <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition LAWLOR, RICHARD 1550 N. 12TH CT. 3B HOLLYWOOD, FL-33019
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ZALBUR, CARMEN 1554 N 12TH CT 9B HOLLYWOOD, FL 33019 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Constance Maria</i>		DATE: <i>3/12/08</i> DAYTIME PHONE #: <i>954-929-7452</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	