

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717986

FILED  
Jan 27, 2010  
Secretary of State

**Entity Name:** CRESTHAVEN VILLAS NO. 14 CONDOMINIUM, INC.

**Current Principal Place of Business:**

% CROSLEY MASTER ASSOCIATION  
2889 CROSLEY DR. EAST  
WEST PALM BEACH, FL 334158418

**New Principal Place of Business:**

**Current Mailing Address:**

% CROSLEY MASTER ASSOCIATION  
2889 CROSLEY DR. EAST  
WEST PALM BEACH, FL 334158418

**New Mailing Address:**

**FEI Number:** 59-2319546

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATTERA, ANTHONY  
CROSLEY RECREATION CENTER  
2889 CROSLEY DR. EAST  
WEST PALM BEACH, FL 33415 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: PD  
Name: LACROIX, DENIS  
Address: 2884 CROSLEY DRIVE EAST APT A  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VD  
Name: ROARKE, RONI  
Address: 2824 CROSLEY DRIVE EAST APT A  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: SD  
Name: HOWE, THERESA  
Address: 2894 CROSLEY DRIVE EAST, APT I  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D  
Name: PASTOR, JUDITH  
Address: 2844 CROSLEY DRIVE EAST APT D  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D  
Name: FOX, RUTH  
Address: 2854 CROSLEY DRIVE EAST APT I  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: T  
Name: RAILEY, ROBERT  
Address: 2854 CROSLEY DRIVE EAST APT F  
City-St-Zip: WEST PALM BEACH, FL 33415

I hereby 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 all other like empowered.

SIGNATURE: DENIS LACROIX

P

01/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date