

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719220

FILED
Apr 07, 2009
Secretary of State

Entity Name: CRESCENT ROYALE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

777 BEACH ROAD
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

777 BEACH ROAD
SARASOTA, FL 34242

New Mailing Address:

FEI Number: 59-1399807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOBECK AND HANSON PA
2033 MAIN ST.
SUITE 403
SARASOTA, FL 34237 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: VP () Delete
Name: FLOYD, JACK
Address: 777 BEACH RD UNIT 404
City-St-Zip: SARASOTA, FL 34242

Title: T () Delete
Name: MCCracken, OLIVER
Address: 777 BEACH RD. UNIT 3C
City-St-Zip: SARASOTA, FL 34242

Title: S () Delete
Name: JOHNSON, DICK
Address: 757 BEACH RD #112
City-St-Zip: SARASOTA, FL 34242

Title: P () Delete
Name: MARSHALL, ROBERT
Address: 777 BEACH RD #1C
City-St-Zip: SARASOTA, FL 34242

Title: AS () Delete
Name: AQUILINA, ROSE
Address: 757 BEACH RD UNIT 512
City-St-Zip: SARASOTA, FL 34242

Title: D () Delete
Name: SMITH, KAREN
Address: 777 BEACH RD #4A
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D (X) Change () Addition
Name: GRIMMER, DAVID
Address: 757 BEACH RD #106
City-St-Zip: SARASOTA, FL 34242

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: MARSHALL ROBERT

P

04/07/2009

Electronic Signature of Signing Officer or Director

Date