


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 01, 2007 8:00 am
Secretary of State

02-01-2007 90033 033 ****61.25

DOCUMENT # 720343
1. Entity Name
CRESTHAVEN VILLAS NO. 19 CONDOMINIUM, INC.



Principal Place of Business Mailing Address
C/O CROSLY MASTER ASSOCIATION C/O CROSLY MASTER ASSOCIATION
2889 CROSLY DRIVE EAST 2889 CROSLY DRIVE EAST
WEST PALM BEACH FL 33415-8418 WEST PALM BEACH FL 33415-8418



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State

1st MOORE CR2E037 (10/06)

4. FEI Number **65-0359562** Applied For
Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
BORGES, REYNALDO
CROSLY RECREATION CENTER
2889 CROSLY DRIVE
WEST PALM BEACH FL 33415

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
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 _____ (NOTE: Registered Agent signature required when registering) _____ DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD VIRGINIA, ISCARO <input type="checkbox"/> Delete 2995-E CROSLY DR. W WEST PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY ST ZIP	SD <input checked="" type="checkbox"/> Delete BIATA, ALEJANDRA 2995 J CROSLY DR W WEST PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY ST ZIP	D <input checked="" type="checkbox"/> Delete WRIGHT, JOHN 2955 J CROSLY DR W WEST PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY ST ZIP	D <input type="checkbox"/> Delete CONRAD, ROY 2981-C CROOSLEY DR WEST WEST PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY ST ZIP	TD <input type="checkbox"/> Delete JOHNSON, ELMER 2991-A CROSLY DR W WEST PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY ST ZIP	VD <input type="checkbox"/> Delete POCCECHI, MARION 2971-I CROSLY DR. W. WEST PALM BEACH FL 33415

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY ST ZIP	D VIRGINIA ISCARO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2995-CROSLY DR WEST APT-E WEST PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY ST ZIP	D LOU LAPOINTE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2981 CROSLY DRIVE WEST APT. A WEST PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY ST ZIP	PD LARRY GARVEY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2995 CROSLY DR W WEST APT. B WEST PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY ST ZIP	VD CONRAD, ROY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2981 CROSLY DR WEST APT C WEST PALM BEACH FL 33415
TITLE NAME STREET ADDRESS CITY ST ZIP	SD POCCECHI, MARION <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2971 CROSLY DRIVE WEST APT. I WEST PALM BEACH FL 33415

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Larry R Garvey* Pres. 1-19-2007 963-7863