

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 31, 2008 8:00 am**  
**Secretary of State**

03-31-2008 90025 015 \*\*\*\*61.25

**DOCUMENT # 721646**

1. Entity Name  
CRESTHAVEN VILLAS NO. 21 CONDOMINIUM, INC.



40000000

Principal Place of Business  
C/O CROSELY MASTER ASSOCIATION  
2889 CROSELY DRIVE EAST  
W. PALM BEACH, FL 33415-8498

Mailing Address  
C/O CROSELY MASTER ASSOCIATION  
2889 CROSELY DRIVE EAST  
W. PALM BEACH, FL 33415-8498



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01092008 Chg-NP CR2E037 (12/06)

4. FEI Number  
59-2111581

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BORGES, REYNALDO  
CROSELY RECREATION CENTER  
2889 CROSELY DRIVE EAST  
W. PALM BEACH, FL 33415

7. Name and Address of New Registered Agent

Name: REAGAN BRENNER, LCM  
Street Address (P.O. Box Number Not Acceptable):  
Crosley Rec. Center  
2889 / Crosley Drive  
City: WPB FL Zip Code: 33415

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2008

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	VP	<input checked="" type="checkbox"/> Delete
NAME	ORVIS, VIOLETTE	
STREET ADDRESS	2833 CROSELY DRIVE WEST APT-H	
CITY-ST-ZIP	WEST PALM BEACH, FL 33415	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	ISCARO, ALFONSE	
STREET ADDRESS	2863-E CROSELY DRIVE WEST	
CITY-ST-ZIP	WEST PALM BEACH, FL 33415	
TITLE	SD	<input type="checkbox"/> Delete
NAME	JOHNSON, LUCILLE	
STREET ADDRESS	2833 G CROSELY DR W	
CITY-ST-ZIP	WEST PALM BEACH, FL 33415	
TITLE	D	<input type="checkbox"/> Delete
NAME	MECOZZI, JOSEPH	
STREET ADDRESS	2853 - B CROSELY DR W	
CITY-ST-ZIP	WEST PALM BEACH, FL 33415	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JOHNSON, JACK	
STREET ADDRESS	2833 G CROSELY DR W	
CITY-ST-ZIP	WEST PALM BEACH, FL 33415	
TITLE	TD	<input type="checkbox"/> Delete
NAME	WISHART, PATRICIA	
STREET ADDRESS	2843-L CROSELY DRIVE WEST	
CITY-ST-ZIP	WEST PALM BEACH, FL 33415	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Beau Greenwood	
STREET ADDRESS	2853 Crosley Drive West, Apt H	
CITY-ST-ZIP	WPB, FL 33415	
TITLE	VD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lucienne Norman	
STREET ADDRESS	2803 Crosley Drive West, Apt. A	
CITY-ST-ZIP	WPB, FL 33415	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Eileen Aston	
STREET ADDRESS	2803 Crosley Drive West, Apt. H	
CITY-ST-ZIP	WPB, FL 33415	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

03/13/08 561 317 0858

# ATTACHMENT

40055203

# 721646

Cresthaven Villa #21

## 2008 BOARD OF DIRECTORS

<b>PRESIDENT:</b>	<b>BEAU GREENWOOD</b> 2833 CROSLEY DRIVE WEST, APT. H WEST PALM BEACH, FL 33415	<i>beaugr@gmail.com</i> 966-7397 C. 317-0888
<b>VICE PRESIDENT:</b>	<b>LUCIENNE NORRMAN</b> 2803 CROSLEY DRIVE WEST, APT. A WEST PALM BEACH, FL 33415	642-4982
<b>SECRETARY:</b>	<b>LUCILLE JOHNSON</b> 2833 CROSLEY DRIVE WEST, APT. G WEST PALM BEACH, FL 33415	439-2704
<b>TREASURER:</b>	<b>EILEEN ASTON</b> 2803 CROSLEY DRIVE WEST, APT. H WEST PALM BEACH, FL 33415	963-7547
<b>DIRECTOR:</b>	<b>JOSEPH MECOZZI</b> 2853 CROSLEY DRIVE WEST APT. B WEST PALM BEACH, FL 33415	642-2858
<b>DIRECTOR:</b>	<b>ANNA MCMURDY</b> 2863 CROSLEY DRIVE WEST. APT. B WEST PALM BEACH, FL 33415	965-6371
<b>DIRECTOR:</b>	<b>CLAUDE ST. JULES</b> 2893 CROSLEY DRIVE WEST, APT. F WEST PALM BEACH, FL 33415	642-1907
<b>DIRECTOR:</b>	<b>PATRICIA WISHART</b> 2883 CROSLEY DRIVE WEST, APT. I WEST PALM BEACH, FL 33415	641-5684