

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90016 039 ****61.25

DOCUMENT # 724332

1. Entity Name
CRESTHAVEN VILLAS NO. 26 CONDOMINIUM, INC.



Principal Place of Business
2625 DUDLEY DR E
WEST PALM BEACH, FL 33415 US

Mailing Address
2557 DUDLEY DR W
UNIT D
WEST PALM BEACH, FL 33415 US



01162008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2649705	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

ADER, SHIRLEY
2557 DUDLEY DR W
UNIT D
W PALM BCH, FL 33415

**DO NOT WRITE
IN THIS SPACE**

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 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**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FRIEDMAN, LORETTA 2593 DUDLEY DR W, # B WEST PALM BEACH, FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOWLETT, MARGARET 2533 DUDLEY DR. W. #B WEST PALM BEACH, FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T OPPENHEIMER, BRUCE 2521 DUDLEY DR. WEST #C WEST PALM BEACH, FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP O'LARI, GLORIA 2533 DUDLEY DR N, # C W. PALM BEACH, FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAPRELIAN, GEORGE 2521 DUDLEY DR. W. #F WEST PALM BEACH, FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MONTALBANO, JOSEPH 2569 DUDLEY DR W # B WEST PALM BEACH, FL 33415

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IN THIS SPACE**

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: Bruce Oppenheimer **BRUCE OPPENHEIMER** 1/1/08 516 357-8881
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Phone #