

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724844

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** CRESTHAVEN VILLAS NO 27 CONDOMINIUM INC

**Current Principal Place of Business:**

2625 DUDLEY DR. E  
WEST PALM BEACH, FL 33415 US

**New Principal Place of Business:**

2625 DUDLEY DR. EAST  
WEST PALM BEACH, FL 33415 US

**Current Mailing Address:**

2625 DUDLEY DR. E  
WEST PALM BEACH, FL 33415 US

**New Mailing Address:**

2625 DUDLEY DR. EAST  
WEST PALM BEACH, FL 33415 US

**FEI Number:** 59-1945887

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREGORY, ANTHONY E  
2631 DUDLEY DR W  
APT A  
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: RENAUD, BERNARD  
Address: 2619 DUDLEY DRIVE WEST APT. B  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: SD  
Name: HOWE, SALLY  
Address: 2619 DUDLEY DRIVE WEST APT. A  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: TD  
Name: GREGORY, ANTHONY E  
Address: 2631 DUDLEY DR W, APT A  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VD  
Name: MACKEY, GEORGE  
Address: 2653 DUDLEY DR WEST APT. H  
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: BERNARD RENAUD

PD

03/20/2012

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

\_\_\_\_\_  
Date