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FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 726509

(3)

CRESTVIEW GARDENS CONDOMINIUM, INC.

Principal Place	Mailing Address	Mailing Address 2301 SE ATH ST BOYNTON BCN FL 33435-7270			8)) 818)) 9 186 8 1	IUN UNUM BIUN UFUN 1061		
2301 SE 4TH ST BOYNTON BCH FL 33435-7270								
					3. Date Incorporated or Qualified 05/25/1973		of Last Report /12/1995	
2. Principal Pla 21	ace of Business	2a. Mailing Address 26 P.O. Box 9	199		4. FEI Number 59-1691885		Applied For Not Applicable	
Suite, Apt. :		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State 28 Bo> n70n	Beach	F.	, 6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip 24	Country 25		Country 30	,		Yes M	0	
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Re	gistered Ag	ent	
			81	Name				
HOLTHOUSE, DAN			82	82 Street Address (P.O. Box Number is Not Acceptable)				
650 CAS		83						
ROANIO	N BCH FL 33435		63					
			84	City		FL	85 Zip Code	
15 Divorant	to the provisions of Costions 817.050	2 and 617 1509. Florida Statutos	the should r	samed core	coration submits this statement for the purp	1	ning ite registered office	
or register	ed agent, or both, in the State of Flori	da. Such change was authorized	by the corp	oration's bo	pard of directors. I hereby accept the appo	intment as re	gistered agent. I am	
	th, and accept the obligations of, Seci	1					ļ	
SIGNATURE	Signature, typed or printed name of registered agon	COULL Land tille if annicable (NOTE:	Registered Agen	t signature regu	whed when re-instating)	DATE		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		RECTORS IN 12	
TITLE	VPD	DELETE	11 TITLE		የ		Change	
NAME	HALE, ROY		1.2 NAME		Al Pica	boot	~l.l.	
STREET ADDRESS	2301 S.E. 4TH ST. #4		1.3 STREET	ADDRESS	23015, 5, 4	Al Pica 301 S. E. 4th street, to 1 Boynton Beach, Fl. 33435		
CITY-ST-ZIP	BOYNTON BCH FL		1.4 CHTY-S	T - ZIP	Boynton Beach 1	1 339	435	
TITLE	SD	DELETE	2.1 TITLE		, , ,		Change	
NAME	vallegio, kevin		2.2 NAME					
STREET ADDRESS	2301 SE 4TH ST #12		2.3 STREET	ADDRESS				
CITY-ST-ZIP	BOYNTON BCH FL		2. 4 CITY-3	ST-ZIP		<u>-</u>		
TITLE	D	☐ DELETE	3.1 TITLE				Change	
NAME	HOLTHOUSE, DAN							
STREET ADDRESS	650 CASTILLA LN			ADDRESS				
CITY-ST-ZIP	BOYNTON BCH FL	Filosopara .	3.4 CITY-5	ST-ZIP			05	
TITLE	President	DELETE	4.1 TITLE			Ц	Change Addition	
NAME	2301 S. A. 4 25 57	y .	4. 2 NAME					
STREET ADDRESS	Boxwoon Beach		4.3 STREET					
CITY-ST-ZIP	130> 11 Ton Beach	DELETE	4.4 CITY - S	T-ZIP			Change Addition	
TITLE		[] DELEGIE	5.1 TITLE				Change [1] Addition	
NAME			5.2 NAME	1000000				
STREET ADDRESS			5.3 STREET 5.4 DITY - S	\$				
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	1-217		П	Change	
NAME		<u></u>	62 NAME			_	/1	
STREET ADDRESS			63 STREET	ADDRESS	0 1, 1		18, ~	
CITY-ST-ZIP			64 CITY-S		Brook do	0081	t"61.00	
14. I do hereb	by certify that the information supplied	with this filing is voluntarily furnish	ned and doe	s not qualif	y for the exemption stated in Section 119.0	07(3)(k), Florid	la Statutes. Further	
oath; that	if the information indicated on this ann I am an officer or director of the corp n Block 12 or Block 13 if changed, or	oration or the receiver or trustee of	empowered	ie and acci to execute	urate and that my signature shall have the this report as required by Chapter 617, Flo	same legal eff prida Statutes;	rect as if made under ; and that my name	

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

407-736-895

Daytime Phone

CR2E037 (12/9