SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

 \star

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 20, 1999 8:00 am § Secretary of State

04-20-1999 90111 034 ****61.25

OCUMENT # 729579

Corporation Name

CRYSTAL LAKES PROPERTY OWNERS ASSOCIATION, INC.

incipal Place of Business	
O LAKEVIEW DR.	
) BOX 510864	
ELBOURNE BEACH FL 32951	

Mailing Address

P O BOX 510864

MELBOURNE BCH FL 32951



Principal Place of Business		2a. Mailing	Address			3. Date Incorpo 05/08/197	orated or Qualifed		
Suite, Apt. #, et	CC.		pt. #, etc.			4. FEI Number 59-27367			Applied For Not Applicable
City & State		City & 5	State			5. Certifcate of	Status Desired		\$8.75 Additional Fee Required
Zip	Country 25	Zip	Zip Country			6. Election Can Trust Fund C	npaign Financing Contribution		\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent						
greer, kare	N		· . :	81	Name Street Addres	ISA A ss (P.O. Box Num	a Sralla berjis Not Accepta	eh Lane	<u> </u>
355 RIGGS AV MELBOURNE	/c. BCH. FL 32951		, i	83	, 00	z yaza			
						bourne		h FL	85 32951
office or registe	e provisions of Sections 617.0 ered agent, or both, in the Stat miliar with, and acceptathe oblig	e of Florida. Such	change was authorized	DV U	named corpor he corporation	ation submits this 's board of directo	statement for the ors. I hereby accep	ot the appoint	hanging its registered tment as registered

agent. I a	n familiar with, and acceptathe obligations of Section 617.0503, Florida	a Statutes.	- alilaa)	
GNATURE	Signafure typed or printed name of registered agent and title if applicable. (NOTE: Re	agistered Agent signature r	required when reinstating) DATE		
	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
E	DELETE DELETE	1.1 TITLE	ρ	Change	☐ Addition
Æ	GREER, KAREN	1.2 NAME	Failla, Paul 410 Lakeview Dr		
EET ADORESS!	355 RIGGS AVE.	1.3 STREET ADDRESS	410 Lakeview Dr _		
r-ST-ZIP	MELBOURNE BCH. FL 32951	1,4 CITY-ST-ZIP	McIbaurne Beach, th	3295	
E	VP DELETE	2.1 TITLE	VP / T	Change	Addition
4€	FAILLA, PAUL	2.2 NAME	Lija Nasrallah 400 spoonbill Lane		
EET ADDRESS	410 LAKEVIEW DR.	2.3 STREET ADDRESS	480 Spoonbill Lane	. 220	- 1
/-ST-ZIP	MELBOURNE BCH FL 32951	2. 4 CITY-ST-ZIP	melbourne Beach F	<u>(, 529</u>	<u> </u>
E	§ DELETE	3.1 TITLE	5 .	☐ Change	Addition
1E	HARRIS, LINDA	3.2 NAME	Bob Silverman,		
EET ADDRESS	390 LAKEVIEW DR.	3.3 STREET ADDRESS	5056 Malabar Blva.	2006	
/-ST-ZIP	MELBOURNE BCH FL 32951	3.4. CITY-ST-ZIP	melbourne Beach, FC	32951	
E	T □ DELETE	4.1 TITLE	D	Change	☐ Addition
1E	PANZARINO, SUE	4, 2 NAME			
EET ADDRESS	290 ATLANTIC DR.	4.3 STREET ADDRESS			
/-ST-ZIP	MELBOURNE BCH. FL 32951	4.4 CITY-ST-ZIP			
Ε	D DELETE	5.1 TITLE	(D)	☐ Change	Addition
1E	FINCH, MIDGE	5.2 NAME	Donna Voung 380 Lakeview Dr.		
EET ADDRESS	250 ROSS AVE.	5.3 STREET ADDRESS	380 Lakeliew Dr.		
'-ST-ZIP	MELBOURNE BCH. FL	5.4 CITY-ST-ZIP	melbourne Bch. PL. 3	<u> 2951 </u>	
E	D DELETE	6.1 TITLE		☐ Change	☐ Addition
Æ	NUGENT, ALICE	6.2 NAME			
EET ADDRESS	360 LAKEVIEW DR.	6.3 STREET ADDRESS			
'-ST-Z)P	MELBOURNE BEACH FL 32951	6.4 CITY-ST-ZIP			

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

IGNATURE: