2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#729579

FILED Jan 29, 2009 Secretary of State

Entity Name: CRYSTAL LAKES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

390 LAKEVIEW DR 235 SPOONBILL LANE

MELBOURNE BEACH, FL 32951 MELBOURNE BEACH, FL 32951

Current Mailing Address: New Mailing Address:

P O BOX 510864

MELBOURNE BCH, FL 32951 US

FEI Number: 59-2736757 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DEMI, PENNY
235 SPANBILL LA
DEMI, PENNY
235 SPOONBILL LA

MELBOURNE BEACH, FL 32951 US MELBOURNE BEACH, FL 32951 US

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: 01/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: ST () Delete Title: ST (X) Change () Addition

Name:DEMI, PENNYName:DEMI, PENNYAddress:235 SPOON BILL LAAddress:235 SPOONBILL LA

City-St-Zip: MELBOURNE BEACH, FL 32951 City-St-Zip: MELBOURNE BEACH, FL 32951

Title: P () Delete Title: P (X) Change () Addition Name: FAILLAR, PAUL PAUL

Address: 410 LAKEVIEW DR Address: 410 LAKEVIEW DR

City-St-Zip: MELBOURNE BEACH, FL 32951 City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VP () Delete Title: () Change () Addition Name: FINCH, RICHARD Name:

 Address:
 250 ROSS AVE
 Address:

 City-St-Zip:
 MELBOURNE BEACH, FL 32951
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: PENNY DEMI S/T 01/29/2009