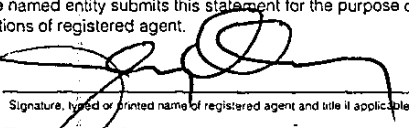


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 20, 2004 8:00 am
Secretary of State

08-20-2004 90008 001 ****61.25

DOCUMENT # 740130 1. Entity Name CRESCENT BEACH - FOUR WINDS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 8130 A1A SO. ST. AUGUSTINE, FL 32086			Mailing Address 4000-B ST. JOHNS AVENUE STE 22 JACKSONVILLE, FL 32205		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1920296	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent CRAVEY, JERRY R 4000-B ST. JOHNS AVENUE STE 22 JACKSONVILLE, FL 32205				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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  Signature, typed or printed name of registered agent and title if applicable.		Jerry R. Cravey (NOTE: Registered Agent signature required when reinstating)		8/19/04 DATE	
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 2004					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD KINSLEY, JANSEON D 12938 MADARIN ROAD JACKSONVILLE, FL 32223 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT TURNBULL, TOM 8703 BASKERVILLE PLACE UPPER MARLBORO, MD 20772 ☒ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD Martie & Joan DeCamp 8130 A1A South J-11 St. Augustine, FL 32080 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP KNIGHT, ARDEN P.O. BOX 524 BALSAM, NC 28707 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS DULL, FRANCES 402 E BLAKE AV CONNELLSVILLE, PA 154252225 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JAEGER, ROY 100 WASHINGTON AVENUE AVON BY THE SEA, NJ 07717 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LENTZ, BOB 491 KEVIN DR ORANGE PARK, FL 32073 ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
12. 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 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: 		8/19/04 Date			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #			

24080600



06232004 Chg-NP CR2E037 (10/03)