2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745895

FILED Jun 04, 2008 Secretary of State

Entity Name: CRYSTAL BAY CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4491 CRYSTAL LAKE DRIVE POMPANO BEACH, FL 33064 **Current Mailing Address: New Mailing Address:** 4491 CRYSTAL LAKE DRIVE POMPANO BEACH, FL 33064 FEI Number: 59-2221750 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MANGIS, PATTIE 4491 CRYSTAL LK DR **APT 207A** POMPANO BEACH, FL 33064 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MILLER, HENRY S Name: Name: Address: 4491 CRYSTAL LAKE DRIVE APT 201B Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: MANGIS, PATTIE Name: Address: 4491 CRYSTAL LAKE DRIVE, APT 207A Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: Title: () Delete Title: () Change () Addition COGLITORE, RON Name: Name: 4491 CRYSTAL LAKE DRIVE APT 203C Address: Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: () Delete Title: SD Title: () Change () Addition Name: ESSER, TONI Name: 4491 CRYSTAL LAKE DRIVE APT 205A Address: Address: City-St-Zip: POMPANO BEACH, FL 33064 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: PATTIE MANGIS TD 06/04/2008