2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007
Secretary of State

DOCUMENT# 749721

Entity Name: CRYSTAL COVE TOWNHOME HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

64 JOHN SIMS PKWY.
VALPARAISO, FL 32580

New Principal Place of Business:

Current Mailing Address:

64 JOHN SIMS PKWY.
VALPARAISO, FL 32580

New Mailing Address:

FEI Number: 59-2030863 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DURRENBERGER, ERLENE B.
64 JOHN SIMS PKWY
VALPARAISO, FL 32580 US

Name and Address of New Registered Agent:

DURRENBERGER, ERLENE B
64 JOHN SIMS PKWY
VALPARAISO, FL 32580 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: ERLENE B. DURRENBERGER 01/29/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: STD ( ) Delete
Name: DURRENBERGER, ERLENE, B
Address: 64 JOHN SIMS PARKWAY
City-St-Zip: VALPARAISO, FL 00000,

Title: PD ( ) Delete
Name: CAMPBELL, BRYAN E
Address: 58 JOHN SIMS PARKWAY
City-St-Zip: VALPARAISO, FL 32580

Title: VD ( ) Delete
Name: SIKES, JOSEPH E
Address: 66 JOHN SIMS PARKWAY
City-St-Zip: VALPARAISO, FL 32580

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition
Name: DURRENBERGER, ERLENE
Address: 64 JOHN SIMS PARKWAY
City-St-Zip: VALPARAISO, FL 32580

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BRYAN E. CAMPBELL PD 01/29/2007
Electronic Signature of Signing Officer or Director Date