2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750683

FILED Mar 30, 2009 Secretary of State

Entity Name: CRESTWOOD CONDOMINIUM, INC.

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

100 SE CRESTWOOD CIR STUART, FL 34997

Current Mailing Address: New Mailing Address:

100 SE CRESTWOOD CIR STUART, FL 34997

FEI Number: 59-2257765 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:

MCDANIEL, JOHN C 100 S.E. CRESTWOOD CIRCLE STUART, FL 34997

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete GIBB. O'BRIEN ROBERT, BLACKFORD Name: Name: 700 US HWY. 2 #H Address: 108 SE CRESTWOOD CIRCLE Address:

City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: STUART, FL 34997

Title: PD () Delete Title: (X) Change () Addition

Name: MCDANIEL, JOHN Name: MCDANIEL, JOHN

Address: 170 SE CRESTWOOD CIRCLE Address: 8625 SW KANNER HIGHWAY City-St-Zip: STUART, FL 34997 City-St-Zip: INDIANTOWN, FL 34956

() Delete Title: Title: () Change () Addition

ROBB, PAT Name: Name: 120 S.E. CRESTWOOD CIRCLE Address: Address:

City-St-Zip: STUART, FL 34997 City-St-Zip:

Title: TD () Delete Title: (X) Change () Addition

Name: WILSON, RANDY Name: SAAD, JANIE

102 SE CRESTWOOD CIRCLE Address: 700 US HWY 1 #H Address:

City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: STUART, FL 34997

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: JOHN C. MCDANIEL PD 03/30/2009