2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759462

FILED Feb 24, 2005 Secretary of State

Entity Name: CROTON PARK HOMEOWNER'S ASSOCIATION, INC.

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

P.O. BOX 360046

MELBOURNE, FL 329360046 US

Current Mailing Address: New Mailing Address:

P.O. BXO 340046

MELBOURNE, FL 329360046 US

FEI Number: 59-2130812 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:

MULLINS, ALEXANDRIA LANGWORTHY, LISA 1955 WEST SHORES RD PO BOX 340046

MELBOURNE, FL 32935 US MELBOURNE, FL 32936 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: LISA LANGWORTHY 02/24/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WALTER, DROUIN JR
 Name:
 ELKINS, WALTER

 Address:
 1933 WEST SHORES RD
 Address:
 PO BOX 360046

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:
 MELBOURNE, FL 32936

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

 Name:
 ERNEST, MULLINS
 Name:
 LANGWORTHY, LISA

 Address:
 1855 WEST SHORES RD
 Address:
 PO BOX 360046

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:
 MELBOURNE, FL 32936

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

 Name:
 MULLINS, ALEXANDRIA
 Name:

 Address:
 1955 WEST SHORES RD
 Address:

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:

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

 Name:
 STREET-GROSS, ANN F
 Name:

 Address:
 2529 BRETT CT.
 Address:

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LISA LANGWORTHY T 02/24/2005