2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 759462

1. Entity Name

CROTON PARK HOMEOWNER'S ASSOCIATION, INC.

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FILED Feb 05, 2003 8:00 am Secretary of State

02-05-2003 90103 021 ****61.25

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CITY-ST-ZIP MELBOURNE FL 32935 CITY-ST-ZIP TITLE NAME STREET-GROSS, ANN F STREET-GROSS, ANN F STREET ADDRESS CITY-ST-ZIP MELBOURNE FL 32935 CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				_			
MEDOURNE FI. 2895-0048 WEIGHT AND Series Se	Principal Pla	ace of Business	Mailing Address				
2. Principal Place of Business Suita, Apt # etc. Suita, Apt # etc. Suita, Apt # etc. City & State City & State City & State City & State Country Zip Zip Country Zip Zip Zip Zip Zip Zip Zip Zi	P.O. BOX 360046 MELBOURNE FL 32936-0046		MELBOURNE FL 32936-004	16 ,			
Suite, Apt. #, etc. City & State ALEXANDRIA, MULLINS 1955 WEST SHORES RD MELBOURNE FL 22355 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the State of Fordal. I am Tamillar with and accept the obligations of registered apent, or north, in the Stat	00		00	•		Para 1870 Baria Baria (1880 Baria Baria Baria)	E11 510(1 610)) 169)
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Country Zip Country Zip Country 6. Certificate of Status Desired \$8.75 Additional Fee Required Agent \$8.75 Additional \$8.75 Addi	Suite, Apt. #, etc. Suite, Apt. #, e		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES	
Some and Address of Current Registered Agent	City & State		City & State	City & State		59-2130812 Applied For	
ALEXANDRIA, MULLIVS 1955 WEST SHORES RD MELBOURNE FL 32935 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. 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. 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. 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. 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. 9. Election Campaign Financing 7. Name and Address of Now Registered Agent. 9. The Street Address (RO Box Number is Not Acceptable) 1. The Address of Now Number is Not Acceptable) 1. The Address of Now Number is Not Acceptable) 1. The Address of Now Number is Not Acceptable) 1. The Address of Now Number is Not Acceptable) 1. The Address of Now Number is Not Acceptables 1. The Address of Now Number is Not Acceptables 1. The Address of Now Number is Not Acceptables 1. The Address of Now Number is Not Acceptables 1. The Address of Now Number is Not Acceptables 1. The Address of Now Number is Not Acceptables 1. The Address of Now Number is Not Acceptables 1. The Address of Now Number is Not Acceptables 1. The Address of Now Number is Not Acceptables 1. The Address of Now Number is Not Acceptables 1. The Address of Now Number is	Zip	Country	Zip	Country	5. Certificate of St		Additional
ALEXANDRIA, MULLIVS 1955 WEST SHORES RD MELBOURNE FL 32935 City FL Zip Code 6. 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 General Address (RO Box Number is Not Acceptable) City FL Zip Code 6. 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 General Agent agent and time is applicable. PILE NOW: FEE IS \$61.25 9. Bloction Compaging Financing Added to Fees Added to Fees Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 THE WALTER, DROUIN JR STREET ADDRESS OTH 51-29 MELBOURNE FL 32935 OTH 51-29 MELBOURNE FL 32935 OTH 51-29 MELBOURNE FL 32935 THE MULLINS, ALEXANDRIA STREET ADDRESS OTH 51-29 MELBOURNE FL 32935 MELBOURNE FL 32935 OTH 51-29		6. Name and Address of Currer	nt Registered Agent		7. Name and Add	···	
8. The above named entity submits the statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Symmum, lipsid or printed name of reposted agent and dee it applicable. (NOTE Registered Agent algobiation DATE	1955 WEST SHORES RD			Name AL-exaudria Mullins Street Address (P.O. Box Number is Not Acceptable)			
SIGNATURE Signature byted or printed name of requirefed agent and tole it applicable. (NOTE Registered Agent dignature required whan reintaining) DATE	8. The above	e named entity submits this statement	for the purpose of changing its	: [or registered agent, or both, in	rL	
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS NOT Delete Trust Fund Contribution. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS NOT DELETED ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO O	tne obliga	ations of registered agent.					
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Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE S WALTER, DROUIN JR STREET ADDRESS STR	GIGIVATORIE		nt and title if applicable. (NOTE	E: Registered Agent signal	ture required when reinstating)	DATE	
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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.

iandria Mullins 2 Febo3 32/255-2188