

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 762561 (9)

1. Corporation Name

CRYSTAL LAKE PARADISE CONDOMINIUM, INC.



Principal Place of Business	Mailing Address
1177 KANE CONCOURSE SUITE 104 BAY HARBOR ISLANDS FL 33154	1177 KANE CONCOURSE SUITE 104 BAY HARBOR ISLANDS FL 33154

3. Date Incorporated or Qualified	03/23/1982
4. FEI Number	65-0093617
Applied For	Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 c/o Sachs, Sax & Klein, P.A. Suite, Apt. #, etc.	26 c/o Sachs, Sax & Klein, P.A. Suite, Apt. #, etc.
22 301 Yamato Rd., Suite 4150 City & State	27 P.O. Box 810037 City & State
23 Boca Raton, FL Zip	28 Boca Raton, FL Zip
24 33431 Country USA	29 33481-0037 Country USA

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent	
SABATINO, JAMES R. 1177 KANE CONCOURSE SUITE 104 BAY HARBOR ISLANDS FL 33154	

10. Name and Address of New Registered Agent	
81 Name	Robert Burr, Esq.
82 Street Address (P.O. Box Number is Not Acceptable)	301 Yamato Road, Suite 4150
83	
84 City	Boca Raton FL
85 Zip Code	33431

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the provisions of, Section 617.0503, Florida Statutes.

SIGNATURE *Robert Burr* DATE 1-20-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD <input type="checkbox"/> DELETE	1.1 TITLE	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLOUIN, MARCEL	1.2 NAME	Blouin, Marcel (address)
STREET ADDRESS	1177 KANE CONCOURSE, #104 (address change)	1.3 STREET ADDRESS	301 Yamato Road, Suite 4150
CITY-ST-ZIP	BAY HARBOR ISLAND FL	1.4 CITY-ST-ZIP	Boca Raton, FL 33431
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUTIL, MARCEL (address change)	2.2 NAME	Dutil, Marcel (address)
STREET ADDRESS	1177 KANE CONCOURSE, #104	2.3 STREET ADDRESS	301 Yamato Road, Suite 4150
CITY-ST-ZIP	BAY HARBOR ISLAND FL	2.4 CITY-ST-ZIP	Boca Raton, FL 33431
TITLE	DS <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUTIL, ANNE-MARIE	3.2 NAME	
STREET ADDRESS	6742 DEERSPRING LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIDDLETOWN MD	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert Burr* 2/18/98

CF2E037 (10/97)