

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 03 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 # **770182** (4)
1. Corporation Name
CRESTWOOD VILLAS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 570 57TH AVE W 107 BRADENTON FL 34207 US	Mailing Address PO BOX 10714 SUITE E-3 BRADENTON FL 34282 US
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3. Date Incorporated or Qualified 09/12/1983		
4. FEI Number 59-2391486	Applied For ☐	Not Applicable ☐

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent MARRONE, BOB 570 57TH AVE W #107 BRADENTON FL 34207	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD NAME WALTON, JIM J STREET ADDRESS 5339 PAMELA WOOD WAY CITY-ST-ZIP SARASOTA FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE VD NAME CRINCIC, LADDIE J STREET ADDRESS 5348 CRESTLAKE BLVD CITY-ST-ZIP SARASOTA FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE TD NAME VERKLER, SHIRLEY STREET ADDRESS 5416 CRESTLAKE BLVD CITY-ST-ZIP SARASOTA FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE SD NAME FRITH, CHARLES STREET ADDRESS 5321 PAMELA WOOD WAY CITY-ST-ZIP SARASOTA FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE DAL NAME De Wit, Charles STREET ADDRESS 5332 Crestlake Blvd. CITY-ST-ZIP Sarasota, FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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: *Laddie J. Crinic* **REQUIRED** 1/19/98 741-756-0401

CR2E037 (10/97)