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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 770182

1. Corporation Name

CRESTWOOD VILLAS CONDOMINIUM ASSOCIATION, INC.

205842 - 90148 - 28

Principal Place of Business	Mailing Address
570 57TH AVE W 107 BRADENTON FL 34207 US	PO BOX 10714 SUITE E-3 BRADENTON FL 34282 US

2. Principal Place of Business	2a. Mailing Address
21 2100 CONSTITUTION BL	26 2100 CONSTITUTION BL
22 Suite, Apt. #, etc. 113	27 Suite, Apt. #, etc. 113
23 City & State SARASOTA FL	28 City & State SARASOTA FL
24 Zip 34231 25 Country US	29 Zip 34231 30 Country USA

3. Date Incorporated or Qualifed: 09/12/1983

4. FEI Number: 59-2391486 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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: LARRY ASARCH
82 Street Address (P.O. Box Number is Not Acceptable): 2100 CONSTITUTION BL
83
84 City: SARASOTA FL 85 Zip Code: 34231

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: LARRY V ASARCH MNG ACT / ASST SEC 3-3-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	WALTON, JIM J		1.2 NAME	HOTCHKISS, ROGER	
STREET ADDRESS	5339 PAMELA WOOD WAY		1.3 STREET ADDRESS	5433 PAMELA WOOD WY	
CITY-ST-ZIP	SARASOTA FL		1.4 CITY-ST-ZIP	SARASOTA FL 34233	
TITLE	VD	☒ DELETE	2.1 TITLE	VD	☐ Change ☒ Addition
NAME	CRINCIC, LADDIE J		2.2 NAME	FRANK, GERI	
STREET ADDRESS	5348 CRESTLAKE BLVD		2.3 STREET ADDRESS	5315 PAMELA WOOD WY	
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP	SARASOTA FL 34233	
TITLE	TD	☐ DELETE	3.1 TITLE	SD	☒ Change ☐ Addition
NAME	VERKLER, SHIRLEY		3.2 NAME		
STREET ADDRESS	5416 CRESTLAKE BLVD		3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		3.4 CITY-ST-ZIP		
TITLE	SD	☒ DELETE	4.1 TITLE	TD	☐ Change ☒ Addition
NAME	FRITH, CHARLES		4.2 NAME	CAROL, KATHY	
STREET ADDRESS	5321 PAMELA WOOD WAY		4.3 STREET ADDRESS	5422 CRESTLAKE BL	
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-ST-ZIP	SARASOTA FL 34233	
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	DEWIT, CHARLES		5.2 NAME		
STREET ADDRESS	5332 CHESTLAKE BLVD		5.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	AS	☐ Change ☒ Addition
NAME			6.2 NAME	ASARCH, LARRY	
STREET ADDRESS			6.3 STREET ADDRESS	2100 CONSTITUTION BL	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	SARASOTA FL 34231	

CR2E037 (11/98)

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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED LARRY V ASARCH 3-3-99 941 927 6464
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #