

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 25, 2007 8:00 am
Secretary of State

01-29-2007 90080 048 ****61.25

DOCUMENT # 770182 1. Entity Name CRESTWOOD VILLAS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 2477 STICKNEY PT RD 118 A SARASOTA FL 34231 US			Mailing Address 2477 STICKNEY PT RD 118 A SARASOTA FL 34231 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		4. FEI Number 59-2391486	
5. Certificate of Status Desired ☐		☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ASARCH, LARRY 2477 STICKNEY POINT RD 118 A SARASOTA FL 34231				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ 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. SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when terminating)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TD WALTON, JAMES 5339 PAMELA WOOD WAY SARASOTA FL 34233	☒ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TREASURER DOROTHY VAN ZEIL 5374 CRESTLAKE BLVD SARASOTA, FL 34233	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD GRAYELL, WM 4347 BRITTANY LN SARASOTA FL 34233	☒ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SECRETARY LAVERNE SELBY 5433 PAMELA WOOD WAY SARASOTA, FL 34233	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD BOYCE, JAN 4329 BRITTANY LANE SARASOTA FL 34233	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DIRECTOR MELANNE KRAL 5341 CRESTLAKE BLVD SARASOTA, FL 34233	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD BAADER, PAM 5377 CHESTLAKE BLVD SARASOTA FL 34233	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	AS ASARCH, LARRY 2477 STICKNEY PT RD 118A SARASOTA FL 34231	☒ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.					
SIGNATURE: <u>Pamela J. Baader, President</u> <u>May 21, 2007</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					