



2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2006 8:00 am
Secretary of State

03-22-2006 90002 018 ***150.00

DOCUMENT # G33597 1. Entity Name CRYSTAL COMMUNITY MANAGEMENT, INC.					
Principal Place of Business <i>6110 N. Ocean Boulevard</i> 5995 BANNOCK TERRACE BOYNTON BCH., FL 33437				Mailing Address <i>6110 N. Ocean Boulevard</i> 5995 BANNOCK TERRACE BOYNTON BCH., FL 33437	
2. Principal Place of Business <i>6110 N. Ocean Boulevard</i> Suite, Apt. #, etc. <i>#39</i> City & State <i>Ocean Ridge, Florida</i> Zip <i>33435</i>		3. Mailing Address <i>6110 N. Ocean Boulevard</i> Suite, Apt. #, etc. <i>#39</i> City & State <i>Ocean Ridge, Florida</i> Zip <i>33435</i>			
4. FEI Number 59-2286927				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BARTLETT, JOSEPH <i>Edward R. O'Connell</i> 5995 BANNOCK TERRACE <i>6110 N. Ocean Boulevard</i> BOYNTON BCH, FL 33437 <i>#39</i> <i>Ocean Ridge, Florida</i> <i>33435</i>					
7. Name and Address of New Registered Agent Name <i>Edward R. O'Connell</i> Street Address (P.O. Box Number is Not Acceptable) <i>6110 N. Ocean Boulevard</i> <i>#39</i> City <i>Ocean Ridge</i> FL Zip Code <i>33435</i>					
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 <i>Edward R. O'Connell</i> DATE <i>3/17/2006</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BARTLETT, JOE <i>Edward R. O'Connell</i> <input checked="" type="checkbox"/> Delete <i>903 TIMBERLANE CIRCLE</i> <i>6110 N. Ocean Boulevard</i> GREENACRES, FL <i>Ocean Ridge, Florida</i> <i>33435</i>				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 607, 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: <i>Edward R. O'Connell</i> DATE <i>3/17/2006</i> DAYTIME PHONE # <i>561-5853</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					