

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002701

FILED
Apr 24, 2008
Secretary of State

Entity Name: CRYSTAL BAY AT KINGSWAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11644 SW EGRET CIRCLE
ARCADIA, FL 34269

New Principal Place of Business:

Current Mailing Address:

11644 SW EGRET CIRCLE
ARCADIA, FL 34269

New Mailing Address:

PO BOX 380758
MURDOCK, FL 33938

FEI Number: 65-1001069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GATEWAY MANAGEMENT
23081 HARBORVIEW ROAD
2ND FLOOR
PORT CHARLOTTE, FL 33980 US

Name and Address of New Registered Agent:

GATEWAY MANAGEMENT
1532 RIO DE JANEIRO AVE
PUNTA GORDA, FL 33983 US

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.

SIGNATURE:

04/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STASI, MAUREEN
Address: 11644 SW EGRET CIRCLE #702
City-St-Zip: ARCADIA, FL 34269

Title: VP () Delete
Name: VANTASSEL, FRED
Address: 11644 SW EGRET CIR #1106
City-St-Zip: ARCADIA, FL 34269

Title: T () Delete
Name: FRAUENSTEIN, BOB
Address: 11644 S.W. EGRET CIR #504
City-St-Zip: LAKE SUZY, FL 34269

Title: D () Delete
Name: ACHEY, PAUL J
Address: 11644 S.W. EGRET CIRCLE, #208
City-St-Zip: LAKE SUZY, FL 34269

Title: S () Delete
Name: PETERS, BRUCE
Address: 11644 S.W. EGRET CIR #707
City-St-Zip: LAKE SUZY, FL 34269

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: TEAL, PAT
Address: PO BOX 380758
City-St-Zip: MURDOCK, FL 33838

Title: TD (X) Change () Addition
Name: FRAUENSTEIN, BOB
Address: 11644 S.W. EGRET CIR #504
City-St-Zip: LAKE SUZY, FL 34269

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: PETERS, BRUCE
Address: 11644 S.W. EGRET CIR #707
City-St-Zip: LAKE SUZY, FL 34269

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAUREEN STASI

PD

04/24/2008

Electronic Signature of Signing Officer or Director

Date