


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 8:00 am
Secretary of State

01-11-2008 90058 013 ****61.25

DOCUMENT # N0100000593

1. Entity Name
CRISTELLE CAY CONDOMINIUM ASSOCIATION OF FLORIDA, INC.



Principal Place of Business Mailing Address
1430 S OCEAN BLVD **1430 S OCEAN BLVD**
LAUDERDALE-BY-THE-SEA, FL 33062 US **LAUDERDALE-BY-THE-SEA, FL 33062 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 Zip Country

400000 -



01032008 Chg-NP CR2E037 (12/06)

4. FEI Number Applied For
65-1102585 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

LEVINE, PAUL H
1430 S OCEAN BLVD
LAUDERDALE, FL

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 reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

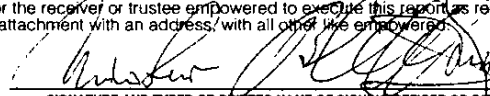
10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WOLLUM, MARION	
STREET ADDRESS	1430 S. OCEAN 12A	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA, FL 33062	
TITLE	D	<input type="checkbox"/> Delete
NAME	PIPER, JAMES	
STREET ADDRESS	1430 S OCEAN BLVD #6-A	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA, FL 33062	
TITLE	D	<input type="checkbox"/> Delete
NAME	LEIBOWICH, SHLOMO	
STREET ADDRESS	1430 S OCEAN BLVD #7-A	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA, FL 33062	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LEVE, STUART	
STREET ADDRESS	1430 S OCEAN BLVD #14-B	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA, FL 33062	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARROS, PAUL	
STREET ADDRESS	1430 S. OCEAN BLVD. #4-A	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA, FL 33062	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BRZOBOHATY, MIROSLAV	
STREET ADDRESS	1430 S. OCEAN 9-B	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA, FL 33062	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WYTCENBACH, ALFRED	
STREET ADDRESS	1430 S. OCEAN 3-A-B	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA, FL 33062	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 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 empowerments.

SIGNATURE:  **1-7-08** **954-781-0505**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #