2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002838

FILED Apr 27, 2007 Secretary of State

Entity Name: CRESTWICK CROSSING HOMEOWNERS ASSOCIATION, INC.

Littly Nai	me. CRESTWICK CROSSING HOWLOW	NERO ASSOCIATION, INC.		
Current P	rincipal Place of Business:	New Principal Place of Bu	New Principal Place of Business:	
920 3RD S STE B NEPTUNE	BT EBEACH, FL 32266 US	2900 HARTLEY ROAD JACKSONVILLE, FL 32257	US	
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
920 3RD S STE B NEPTUNE	BT E BEACH, FL 32266 US	2900 HARTLEY ROAD JACKSONVILLE, FL 32257	US	
FEI Number:	: 59-3715599 FEI Number Applied For ()	FEI Number Not Applicable ()	ertificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of Nev	Name and Address of New Registered Agent:	
The above	E BEACH, FL 32266 US named entity submits this statement for the e of Florida.	purpose of changing its registered offic	e or registered agent, or both,	
0.014, (10.	Electronic Signature of Registered Ag	gent	Date	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete HASSELBACH, DAVID 14025 CRESTWICK DR E JACKSONVILLE, FL 32218	Title: () Ch Name: Address: City-St-Zip:	ange () Addition	
Title: Name: Address: City-St-Zip:	SD () Delete PARTAIN, LANCE 13940 CRESTWICK DR W. JACKSONVILLE, FL 32218	Title: () Ch Name: Address: City-St-Zip:	ange () Addition	
Title: Name: Address: City-St-Zip:	TD () Delete WIENS, PATRICK 14236 CRESTWICK DR W JACKSONVILLE, FL 32218	Title: () Ch Name: Address: City-St-Zip:	ange () Addition	

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: CLINT PYLE MGR 04/27/2007