2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002838

FILED Mar 03, 2009 Secretary of State

Entity Name: CRESTWICK CROSSING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 12187 BEACH BLVD SUITE 4 JACKSONVILLE, FL 32246 US **New Mailing Address: Current Mailing Address:** 12620-3 BEACH BLVD SUITE 301 JACKSONVILLE, FL 32246 US FEI Number: 59-3715599 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JARNUTOWSKI, SHERRIE 12620 - 3 BEACH BLVD SUITE 301 JACKSONVILLE, FL 32246 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete WIENS, PATRICK PETERSEN, BRADLEY Name: Name: 12620-3 BEACH BLVD. #301 Address: 12620-3 BEACH BLVD. #301 Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246 (X) Change () Addition Title: SD () Delete Title: PARTAIN, LANCE Name: PARTAIN, LANCE Name: Address: 12620-3 BEACH BLVD. #301 Address: 12620-3 BEACH BLVD. #301 City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246 Title: () Delete Title: (X) Change () Addition HANNAH, THOMAS HANNAH, THOMAS Name: Name: 12620-3 BEACH BLVD. #301 12620-3 BEACH BLVD. #301 Address: Address: City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32246 Title: () Delete Title: () Change (X) Addition Name: Name: POWELL, ROBERT 12620-3 BEACH BLVD. #301 Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32246 Title: () Delete Title: () Change (X) Addition ADAMS, RODNEY Name: Name: 12620-3 BEACH BLVD. #301 Address: Address: JACKSONVILLE, FL 32246 City-St-Zip: City-St-Zip:

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: SHERRIE JARNUTOWSKI RA 03/03/2009