

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006320

FILED
Jun 30, 2004
Secretary of State**Entity Name:** CRESCENT PALMS BEACH HOMEOWNERS, ASSOCIATION, INC.**Current Principal Place of Business:**206 E 4TH ST
PORT ST JOE, FL 32456**New Principal Place of Business:****Current Mailing Address:**206 E 4TH ST
PORT ST JOE, FL 32456**New Mailing Address:****FEI Number:** 04-3709997**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GIBSON, THOMAS S
206 E 4TH ST
PORT ST JOE, FL 32456 US**Name and Address of New Registered Agent:**

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:**Title:** DP () Delete
Name: COCHRAN, IRENE
Address: 215 S NEPTUNE ST
City-St-Zip: PORT ST JOE, FL 32456**Title:** D () Delete
Name: WHITE, CHARLES S
Address: 3906 HWY 98-W STE 37
City-St-Zip: SANTA ROSA BCH, FL 32459**Title:** D () Delete
Name: KNUTSEN, RICK
Address: 1804 DEFOORS MILL CT
City-St-Zip: ATLANTA, GA 30318**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: IRENE COCHRAN

DP

06/30/2004

Electronic Signature of Signing Officer or Director

Date