2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# N02000007797

Entity Name: CRYSTAL POINTE TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

4400 N CRYSTAL LAKE DR
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

Current Mailing Address:

8450 NW 45TH MANOR HOME
CORAL SPRINGS, FL 33065

New Mailing Address:

4448 CRYSTAL LAKE DR
DEERFIELD BEACH, FL 33442

FEI Number: 61-1473884 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEFAZIO, LOUIS ESQ
8450 N.W. 45TH MANOR
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

CRYSTAL POINTE, INC
4400 N CRYSTAL LAKE DR.
DEERFIELD BEACH, FL 33442 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: TONY COSCHIGNANO 04/28/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CASCHIGANO, TONY
Address: 4444 CRYSTAL LAKE DRIVE
City-St-Zip: DEERFIELD BEACH, FL 33064

Title: T ( ) Delete
Name: MEANS, BRAD
Address: 4448 CRYSTAL LAKE DRIVE
City-St-Zip: DEERFIELD BEACH, FL

Title: D ( ) Delete
Name: DEFAZIO, LOUIS
Address: 8450 NW 45TH MANOR C
City-St-Zip: CORAL SPINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: COSCHIGNANO, TONY
Address: 4444 CRYSTAL LAKE DRIVE
City-St-Zip: DEERFIELD BEACH, FL 33064

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: TONY COSCHIGNANO DIR 04/28/2005
Electronic Signature of Signing Officer or Director Date