

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 01, 2001 8:00 am  
Secretary of State

02-01-2001 90072 002 \*\*\*\*61.25

DOCUMENT # N03195

1. Entity Name

CRYSTAL PORT TOWNHOME OWNERS' ASSOCIATION, INC.

Principal Place of Business

110 DAVID STREET  
C/O WAYNE T. BOYETTE  
FT. WALTON BEACH FL 32548

Mailing Address

652 S. WILLETT  
C/O ROBERT SUZANNE PLYLER  
MEMPHIS TN 38104  
US

2. Principal Place of Business

2942 Old Highway 98

Suite, Apt. #, etc.

3. Mailing Address

394 Gardner Dr NE

Suite, Apt. #, etc.

% Michael C Francisco

City & State

Destin FL

City & State

Fort Walton Beach FL

Zip

32541

Country

USA

Zip

32548

Country

USA

4. FEI Number

59-2885295

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fees Required

6. Name and Address of Current Registered Agent

MUEHLBERGER, JERRY MD  
701 FOREST SHORES DR  
MARY ESTHER FL 32569

7. Name and Address of New Registered Agent

Name Michael C Francisco

Street Address (P.O. Box Number is Not Acceptable)

394 Gardner Dr NE

City Fort Walton Beach

FL

Zip Code

32548

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.

SIGNATURE

*Michael C Francisco*

Michael C. Francisco

25 Jan 01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE SD  
NAME MUEHLBERGER, JERRY  
STREET ADDRESS 701 FOREST SHORES DR  
CITY-ST-ZIP MARY ESTHER FL 32569 ☒ Delete

TITLE TD  
NAME SANDLIN, PATRICK  
STREET ADDRESS 142 TIMBER CREEK DR.  
CITY-ST-ZIP CORDOVA TN ☐ Delete

TITLE PD  
NAME DAVIES, WILLIAM P.  
STREET ADDRESS 5178 WHEELIS #6  
CITY-ST-ZIP MEMPHIS TN ☒ Delete

TITLE VD  
NAME PLYLER, BOBBY  
STREET ADDRESS 652 S. WILLETT  
CITY-ST-ZIP MEMPHIS TN ☒ Delete

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE STD  
NAME FRANCISCO, MICHAEL  
STREET ADDRESS 394 Gardner Dr NE  
CITY-ST-ZIP Fort Walton Beach FL 32548 ☐ Change ☒ Addition

TITLE P/D  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD  
NAME Nelson David  
STREET ADDRESS 709 Heatherwood Dr  
CITY-ST-ZIP Birmingham AL 35244 ☐ Change ☒ Addition

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 empowered.

SIGNATURE:

*Michael C Francisco* 25 Jan 01 800 560 4096

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)