


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2004 08:00 AM
Secretary of State

DOCUMENT # N03531
 1. Entity Name:
CRYSTAL VILLAS OWNERS' ASSOCIATION, INC.



Principal Place of Business CRYSTAL VILLAS CONDOMINIUMS 2850 SCENIC HWY 98 DESTIN, FL 32541	Mailing Address CRYSTAL VILLAS CONDOMINIUMS 2850 SCENIC HWY 98 DESTIN, FL 32541 US
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01222004 No Chg-NP CR2E037 (10/03)

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4. FEI Number 59-2686402	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 NEWMAN, RAYMOND F JR.
 348 MIRALCE STRIP PKWY SW STE 7
 FORT WALTON BEACH, FL 32548

DO NOT WRITE IN THIS SPACE

B. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD STRAUBINGER, VINCENT 2850 HWY 98 EAST DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRANNON, TAPPAN 2850 HWY 98 EAST DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KASSING, TOM 2850 SCENIC HWY 98 EAST DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HUFSTEDLER, JON 2850 SCENIC HWY 98 E DESTIN, FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/26/04-80043-012 61.25

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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: *Jon Hufstедler* **Jon HUFSTEDLER** 1-22-04 850-659-0250
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #