## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03531

FILED Mar 20, 2007 Secretary of State

Entity Name: CRYSTAL VILLAS OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

CRYSTAL VILLAS OWNERS ASSOC, INC. 2850 SCENIC HWY 98 DESTIN, FL 32541

**Current Mailing Address: New Mailing Address:** 

CRYSTAL VILLAS OWNERS ASSOC., INC. 2936 SCENIC GULF DRIVE MIRAMAR BEACH, FL 32550 US

FEI Number: 59-2686402 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:

NEWMAN, RAYMOND F JR 348 MIRALCE STRIP PKWY SW STE 7 FORT WALTON BEACH, FL 32548

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:

() Delete (X) Change ( ) Addition BRANNON, TAPPAN WADAS, RICHARD Name: Name:

TOWNHOUSES AT CRYSTAL BEACH #3 Address: 53 GREEN ACRES DRIVE Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: WHITESBORO, NY 13492

Title: VD Title: VD (X) Change ( ) Addition () Delete Name:

STAED, JOHN Name: GILLIAM, HERMAN A Address: P.O. BOX 145 Address: 840 BLUEBIRD ROAD City-St-Zip: SANDY SPRINGS, SC 29677 City-St-Zip: MEMPHIS, TN 38116

Title: STD () Delete Title: STD (X) Change ( ) Addition ADAMS, GERALD ANSON, COLLEEN Name: Name:

259 VAUGHNS GAP ROAD Address: Address: 4309 S. 179TH STREET City-St-Zip: NASHVILLE, TN 37205 City-St-Zip: OMAHA, NE 68135

Title: ( ) Delete Title: ( ) Change (X) Addition

Name: Name: CARTER, JAMES Address: Address: 1300 15TH AVE NW City-St-Zip: City-St-Zip: CAIRO, GA 39828

Title: () Delete Title: ( ) Change (X) Addition

SLUSASZ, STANLEY Name: Name: P.O. BOX 4155 Address: Address: BRANDON, MS 39047 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD WADAS **PRES** 03/20/2007