2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 28, 2006 8:00 am Secretary of State **DOCUMENT # N05000002561** 03-28-2006 90110 015 ****61.25 CRESCENT HILLS HOMEOWNERS ASSOCIATION, INC. Mailing Address 2911-EUNDUSTRIAL PLAZA DRIVE Principal Place of Business d Ania 🗸 2911-E INDUSTRIAL PLAZA DRIVE TALLAHASSEE FL 32301 Tallahässee, FL 32301 03012006 Chg-NP CR2E037 (11/05) Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MANAUSA, DAVIEL E 3520 THOMASVILLE ROAD FOURTH FLOOR TALLAHASSEE, FL 32309 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ■ Addition TITLE ☐ Delete TITLE Change GHAVINI, HOSSEIN NAME 2811-E INDUSTRIAL PLAZA DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32301 CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITL F **GHAVINI, BEHZAD** NAME NAME STREET ADDRESS 2811-E INDUSTRIAL PLAZA DRIVE STREET ADDRESS TALLAHASSEE, FL 32301 CITY-ST-ZIP CITY-ST-ZIP D ☐ Change ☐ Addition ☐ Delete TITLE TITLE **GHAVINI, MEHRDAD** NAME NAME 2811-E INDUSTRIAL PLAZA DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32301 CITY-ST-ZIP ☐ Change Addition ☐ Detete TITLE ΠLE GHAVINI, MEHRAN NAME 2811-E INDUSTRIAL PLAZA DRIVE STREET ADDRESS STREET ADDRESS TALLAHASSEE, FL 32301 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Detete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of 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 of except 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 withyarpaddress, with all other like empowered.

FILED