2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008 08:00 A
Secretary of State

DOCUMENT # N05000007417

1. Entity Name
CRESTWOOD HOMEOWNERS, INC.

Principal Place of Business	Mailing Address
BOX 219 CENTURY, FL 32535	BOX 219 CENTURY, FL 32535

DO NOT WRITE IN THIS SPACE

01152008 No Chg-NP CR2E037 (4/06)

4. FEI Number
NOT APPLICABLE
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROTHSCHILD, HERMAN
2505 ROSEDOWN DRIVE
CANTONMENT, FL 32533

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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
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, 2008

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

U00000790525
01/23/08-80037-017 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	METTLE, GREGG
STREET ADDRESS	BOX 219
CITY-ST-ZIP	CENTURY, FL 32535
TITLE	VD
NAME	HURST, ROSE
STREET ADDRESS	3864 OAKUS STREET, 5-A
CITY-ST-ZIP	MILTON, FL 32583
TITLE	TD
NAME	METTLE, BARBARA
STREET ADDRESS	BOX 219
CITY-ST-ZIP	CENTURY, FL 32535
TITLE	SD
NAME	ROTHSCHILD, HERMAN
STREET ADDRESS	2505 ROSEDOWN DRIVE
CITY-ST-ZIP	CANTONMENT, FL 32533
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby 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 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: _____ Herman Rothschild 1/18/08 (850) 9680329
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #