

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007417

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: CRESTWOOD HOMEOWNERS, INC.

**Current Principal Place of Business:**

BOX 219  
CENTURY, FL 32535

**New Principal Place of Business:**

**Current Mailing Address:**

BOX 219  
CENTURY, FL 32535

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROTHSCHILD, HERMAN  
2505 ROSEDOWN DRIVE  
CANTONMENT, FL 32533 US

**Name and Address of New Registered Agent:**

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:**

Title: PD ( ) Delete  
Name: METTLE, GREGG  
Address: BOX 219  
City-St-Zip: CENTURY, FL 32535

Title: VD ( ) Delete  
Name: HURST, ROSE  
Address: 3864 OAKUS STREET, 5-A  
City-St-Zip: MILTON, FL 32583

Title: TD ( ) Delete  
Name: METTLE, BARBARA  
Address: BOX 219  
City-St-Zip: CENTURY, FL 32535

Title: SD ( ) Delete  
Name: ROTHSCCHILD, HERMAN  
Address: 2505 ROSEDOWN DRIVE  
City-St-Zip: CANTONMENT, FL 32533

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: HERMAN ROTHSCCHILD

SD

04/01/2009

Electronic Signature of Signing Officer or Director

Date