

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000274

FILED
Apr 27, 2009
Secretary of State

Entity Name: THE FOUNTAINS AT CRYSTAL CREEK MULTICONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1105 KENSINGTON PARK DRIVE
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

6972 LAKE GLORIA BLVD
ORLANDO, FL 32809

Current Mailing Address:

1105 KENSINGTON PARK DRIVE
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

6972 LAKE GLORIA BLVD
ORLANDO, FL 32809

FEI Number: 20-8388495

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKETT, WILLIAM A
215 E EOLA DRIVE
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

LELAND MANAGEMENT
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809 US

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: REBECCA FURLOW

04/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FRITZ, MIKE
Address: 5337 MILLENIA LAKES BOULEVARD SUITE 160
City-St-Zip: ORLANDO, FL 32839

Title: DVP () Delete
Name: JOHANNESMEYER, JACK
Address: 5337 MILLENIA LAKES BOULEVARD SUITE 160
City-St-Zip: ORLANDO, FL 32839

Title: DST () Delete
Name: ALVERSON, TAMMY
Address: 5337 MILLENIA LAKES BOULEVARD SUITE 160
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MUSSELWHITE, VIRGINIA
Address: 5337 MILLENIA LAKES BOULEVARD SUITE 160
City-St-Zip: ORLANDO, FL 32839

Title: DVP (X) Change () Addition
Name: ALVERSON, TAMMY
Address: 5337 MILLENIA LAKES BOULEVARD SUITE 160
City-St-Zip: ORLANDO, FL 32839

Title: DST (X) Change () Addition
Name: JOHANNESMEYER, JACK
Address: 5337 MILLENIA LAKES BOULEVARD SUITE 160
City-St-Zip: ORLANDO, FL 32839

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: VIRGINIA MUSSELWHITE

DP

04/27/2009

Electronic Signature of Signing Officer or Director

Date