

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001827

FILED
Jan 26, 2009
Secretary of State

Entity Name: DREW CREST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

120 N. HILLCREST AVE
7
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

120 N. HILLCREST AVE
7
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 59-6059825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARD, R. CARLTON
1253 PARK STREET
CLEARWATER, FL 33756 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: BALDWIN, GERALD O
Address: 1385 DREW ST. #2
City-St-Zip: CLEARWATER, FL 33755

Title: VD () Delete
Name: BARRIENTOS, ERNESTO
Address: 1385 DREW ST. #3
City-St-Zip: CLEARWATER, FL 33755

Title: S () Delete
Name: MANNIX, PAUL
Address: 1385 DREW ST. #4
City-St-Zip: CLEARWATER, FL 33755

Title: TD () Delete
Name: DILLON, THOMAS
Address: 120 N. HILLCREST #7
City-St-Zip: CLEARWATER, FL 33755

Title: D () Delete
Name: RHODES, WILLIAM
Address: 1385 DREW ST. #1
City-St-Zip: CLEARWATER, FL 33755

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:

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: THOMAS E DILLON

TD

01/26/2009

Electronic Signature of Signing Officer or Director

Date