2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

DOCUMENT# N09756

Entity Name: SPYGLASS AT CRESCENT BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8200 A1A S
ST. AUGUSTINE, FL 32080 US

New Principal Place of Business:

Current Mailing Address:

SPYGLASS
8200 A1A S
ST. AUGUSTINE, FL 32080 US

New Mailing Address:

FEI Number: 59-2852836 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAVLICEK, JOHN D
8200 A1A SOUTH
OFFICE
SAINT AUGUSTINE, FL 32080 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: T
Name: BOYER, TIMOTHY
Address: 4708 BARTLETT CT
City-St-Zip: ELKTON, FL 32033

Title: D
Name: FICHERA, VICTORIA
Address: 8200 AIA SO #38
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: SEC
Name: ADKINS, PATSY
Address: PO BOX 3582
City-St-Zip: ST AUGUSTINE, FL 32085

Title: PD
Name: ALDRICH, LARRY
Address: 11331 MUSETTE CIRCLE
City-St-Zip: ALPHARETTA, GA 30004

Title: D
Name: GROTE, DOUGLAS
Address: 8200 A1A SOUTH #43
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: D
Name: JONES, KAREN
Address: 147 CASTLEWOOD RD.
City-St-Zip: BRIGHTON, MI 49230 US

I hereby 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 all other like empowered.

SIGNATURE: TIM BOYER T 01/05/2011

Electronic Signature of Signing Officer or Director Date