

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001445

FILED
Apr 29, 2012
Secretary of State

Entity Name: CRAWFORD PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7 HOPKINS STREET
ST AUGUSTINE, FL 32084

New Principal Place of Business:

7 HOPKINS STREET
ST AUGUSTINE, FL 32084 US

Current Mailing Address:

7 HOPKINS STREET
ST AUGUSTINE, FL 32084

New Mailing Address:

7 HOPKINS STREET
ST AUGUSTINE, FL 32084 US

FEI Number: 90-0594919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARY DAVENPORT PA
1280-B N. PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084 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: DP
Name: HOLIDAY, MELVIN
Address: 801 SCHEIDEL WAY
City-St-Zip: ST AUGUSTINE, FL 32084 US

Title: DVP
Name: JACKSON, TYRONE
Address: 837 SCHEIDEL WAY
City-St-Zip: ST AUGUSTINE, FL 32084 US

Title: DS
Name: REED, GWEN
Address: 812 AVERY ST.
City-St-Zip: ST AUGUSTINE, FL 32084 US

Title: DT
Name: WILLIAM, COOKE
Address: 149 FERROL RD
City-St-Zip: ST. AUGUSTINE, FL 32084 US

Title: D
Name: VALDES, JESSICA
Address: 821 SCHEIDEL WAY
City-St-Zip: ST. AUGUSTINE, FL 32084 US

Title: D
Name: BELLAMY, HOLLY
Address: 817 SCHEIDEL WAY
City-St-Zip: ST. AUGUSTINE, FL 32084 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: WILLIAM COOKE

DT

04/29/2012

Electronic Signature of Signing Officer or Director

Date