

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17630

FILED
Mar 25, 2009
Secretary of State

Entity Name: VILLAS OF CROOKED LAKE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

131 FAIRCHILD STREET
BABSON PARK, FL 33827 US

New Principal Place of Business:

Current Mailing Address:

3723 WHITE OAK COURT
LAKE WALES, FL 33853 US

New Mailing Address:

FEI Number: 59-3714473 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JONES, DAVID
3388 COUNTRY LAKE CIRCLE
LAKE WALES, FL 338989559 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: D () Delete
Name: BAKER, FREDERICK
Address: 5725 SUMMIT BLVD
City-St-Zip: WEST PALM BEACH, FL 33415

Title: PD () Delete
Name: JONES, DAVID
Address: 3388 COUNTRY LAKE CIR.
City-St-Zip: LAKE WALES, FL 33898

Title: SD () Delete
Name: BROWN, JASON
Address: 3421 OAKVIEW DRIVE
City-St-Zip: LAKE LAND, FL 33811

Title: TD () Delete
Name: LYLE, WALKER
Address: P. O. BOX 104
City-St-Zip: HOMELAND, FL 33847

Title: VD () Delete
Name: MESSER, RICHARD
Address: 3723 WHITE OAK CIR
City-St-Zip: LAKE WALES, FL 33898

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: WALKER LYLE

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03/25/2009

Electronic Signature of Signing Officer or Director

Date