

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2008
Secretary of State

DOCUMENT# N21529

Entity Name: CRESCENT LAKE PRESERVATION ASSOCIATION INC.

Current Principal Place of Business:

5924 WEST SHORE DR
PENSACOLA, FL 325260441 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 37441
PENSACOLA, FL 32526 US

New Mailing Address:

FEI Number: 59-2961242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCCOY, ALAN K.
6211 E. SHORE DRIVE
PENSACOLA, FL 32505 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: BRYAN, ALBERT E.,
Address: 6009 E. SHORE DR.
City-St-Zip: PENSACOLA, FL

Title: DS () Delete
Name: MARCINIAK, EDWIN
Address: 5780 W. SHORE DR.
City-St-Zip: PENSACOLA, FL

Title: D () Delete
Name: STEPHENS, MIKE
Address: 3009 HIGH POINTE PLACE
City-St-Zip: PENSACOLA, FL

Title: D () Delete
Name: BREWER, WAYNE
Address: 6016 W. SHORE DR
City-St-Zip: PENSACOLA, FL 32526

Title: S () Delete
Name: SCOTT, RONNIE G
Address: 5842 W. SHORE DR.
City-St-Zip: PENSACOLA, FL 32526

Title: D () Delete
Name: YEARTY, BOB
Address: 5705 E. SHORE DR
City-St-Zip: PENSACOLA, FL 32505

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:

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: ALAN K. MCCOY

_____ Electronic Signature of Signing Officer or Director

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05/09/2008

_____ Date