

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25631

FILED
Aug 26, 2009
Secretary of State

Entity Name: THE CRYSTAL CLUB, INC.

Current Principal Place of Business:

964 CRYSTAL GLEN BLVD.
LECANTO, FL 34461 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15
LECANTO, FL 34460 US

New Mailing Address:

1371 S. BROOKFIELD DR.
LECANTO, FL 34461 US

FEI Number: 59-2929758 **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:

JARRETT, RAE D
1371 S BROOKFIELD DR.
LECANTO, FL 34461 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: P () Delete
Name: JARRETT, RAE D
Address: 1371 S BROOKFIELD DR.
City-St-Zip: LECANTO, FL 34461

Title: VP () Delete
Name: BELL, NANCY
Address: 1088 S.SOFTWINAL LOOP
City-St-Zip: LECANTO, FL 34461

Title: T () Delete
Name: GUTHRIDGE, BARB
Address: 1015 S BROOKFIELD DR.
City-St-Zip: LECANTO, FL 34461

Title: S () Delete
Name: GALAZKA, EILEEN
Address: 1131 S SOFTWIND LOOP
City-St-Zip: LECANTO, FL 34461

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:

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: RAE D. JARRETT

P

08/26/2009

Electronic Signature of Signing Officer or Director

Date