2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 09, 2009
Secretary of State

DOCUMENT# N29560

Entity Name: CRYSTAL-HOMESITES CIVIC ASSOCIATION INC.

Current Principal Place of Business:

589 SE 73RD ST
STARKE, FL 32091

New Principal Place of Business:

Current Mailing Address:

589 SE 73RD ST
STARKE, FL 32091

New Mailing Address:

FEI Number: 59-2413932 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRYSTAL LAKE HOMESITES
589 SE 73RD ST
STARKE, FL 32091 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: TREA ( ) Delete
Name: NABYWANIEC, CHARLES TREA.
Address: 589 SE 71ST ST.
City-St-Zip: STARKE, FL 32091

Title: P ( ) Delete
Name: CHAPPELL, MICHAEL PRES
Address: 494 SE 73RD ST
City-St-Zip: STARKE, FL 32091

Title: B ( ) Delete
Name: WHITAKER, CLAY BOARD
Address: 7354 SE 5TH AVE
City-St-Zip: STARKE, FL 32091

Title: SEC. ( ) Delete
Name: TRULL, BRENDA SEC.
Address: 587 CR 18A
City-St-Zip: STARKE, FL 32091

Title: B ( ) Delete
Name: HODGES, FRED BOARD
Address: 431 S.E. 71ST ST
City-St-Zip: STARKE, FL 32091

Title: B ( ) Delete
Name: TRULL, KENNY BOARD
Address: 587 CR18A
City-St-Zip: STARKE, FL 32091

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: NABYWANIEC, CHARLES PRES.
Address: 589 SE 71ST ST.
City-St-Zip: STARKE, FL 32091

Title: VP (X) Change ( ) Addition
Name: CHAPPELL, MICHAEL V-PRES
Address: 494 SE 73RD ST
City-St-Zip: STARKE, FL 32091

Title: SEC. (X) Change ( ) Addition
Name: TRULL, BRENDA SEC.
Address: 587 SE COUNTY RD. 18A
City-St-Zip: STARKE, FL 32091

Title: TREA (X) Change ( ) Addition
Name: BURGESS, JOHN TREA
Address: 730 SE 71ST STREET
City-St-Zip: STARKE, FL 32091

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: CHARLES NABYWANIEC PRES 07/09/2009

Electronic Signature of Signing Officer or Director — Date