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FILED

May 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N31024** (5)

1. Corporation Name

CRESTWOOD VILLAS PROPERTY OWNERS ASSOCIATION, IN C.

Principal Place of Business

Mailing Address

**MILLER MANAGEMENT SVC INC
2828 PROCTOR ROAD
SARASOTA FL 34231
US**

**MILLER MANAGEMENT SVSC INC
2828 PROCTOR ROAD
SARASOTA FL 34231
US**

3. Date Incorporated or Qualified

03/07/1989

4. FEI Number

59-2391486

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 2848 Proctor Road

26 2848 Proctor Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Sarasota, FL

28 Sarasota, FL

Zip

Country

Zip

Country

24 34231

25 USA

29 34231

30 USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MILLER MANAGEMENT SERVICES INC
2828 PROCTOR ROAD
SARASOTA FL 34231**

81 Name

Miller Management Services, Inc.

82 Street Address (P.O. Box Number is Not Acceptable)

2848 Proctor Road

83

84 City

Sarasota,

FL

85 Zip Code
34231

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

[Signature] **PAMELA J. GREER** **4/30/98**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE

STD

☒ Change ☐ Addition

NAME **TD
CEPPPOS, GERALD**
STREET ADDRESS **4200 CAROL ANN RD.**
CITY-ST-ZIP **SARASOTA FL**

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Sarasota, FL

TITLE ☒ DELETE

2.1 TITLE

VP

☐ Change ☒ Addition

NAME **PD
MERCER, LARRY**
STREET ADDRESS **5311 KELLY DRIVE**
CITY-ST-ZIP **SARASOTA FL**

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**George Anderson
5429 Crestlake Blvd.
Sarasota, FL**

TITLE ☐ DELETE

3.1 TITLE

D

☒ Change ☐ Addition

NAME **SD
SALLY K. TRUEBLOOD**
STREET ADDRESS **5370 KELLY DRIVE**
CITY-ST-ZIP **SARASOTA FL**

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

Sarasota, FL

TITLE ☒ DELETE

4.1 TITLE

D

☐ Change ☒ Addition

NAME **VD
MATHESON, RICHARD**
STREET ADDRESS **4208 BRITTANY LANE**
CITY-ST-ZIP **SARASOTA FL**

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

**Bob Feeney
5321 Crestlake Blvd.
Sarasota, FL**

TITLE ☒ DELETE

5.1 TITLE

PD

☐ Change ☒ Addition

NAME **ASD
LEN PATLEN**
STREET ADDRESS **5436 KELLY DRIVE**
CITY-ST-ZIP **SARASOTA FL**

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

**Ann Whitford
5435 Kelly Drive
Sarasota, FL**

TITLE ☐ DELETE

6.1 TITLE

☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-ST-ZIP

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed on an attachment with an address.

SIGNATURE:

[Signature] **Treasurer**

4-30-98

941-377-3913

CR2E037 (10/97)