


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90404 026 ****61.25

DOCUMENT # N35372 1. Entity Name CREST PLACE OWNERS' ASSOCIATION, INC.					
Principal Place of Business 8543 S HIGHWAY 441 LEESBURG, FL 34788 US				Mailing Address P O BOX 491271 LEESBURG, FL 34749 US	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3011435	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent PURDUM, ROSEMARY P. 33703 OVERTON DR. LEESBURG, FL 34788				7. Name and Address of New Registered Agent Name Daniel M. Andrews Street Address (P.O. Box Number is Not Acceptable) 8543 U.S. Highway 441 City Leesburg, FL Zip Code 34788	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ANDREWS, DANIEL M. 8525 S. HIGHWAY 441 LEESBURG, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	8543 U.S. Highway 441 34788
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PURDUM, ROSEMARY P. 33703 OVERTON DR. LEESBURG, FL	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	34788
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST BERGMAN, EDWARD JR 8541 S HWY 441 LEESBURG, FL	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	34788
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST E.F. Miller, Jr. 8543 U.S. Highway 441 Leesburg, FL 34788	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	34788
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	34788
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	34788
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Daniel M. Andrews				4/29/04	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	