

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35816

FILED
Jan 13, 2009
Secretary of State

Entity Name: CRYSTAL LAKE PROPERTY OWNERS' ASSOCIATION TWO, INC.

Current Principal Place of Business:

14960 COLLIER BLVD
NAPLES, FL 34119 US

New Principal Place of Business:

Current Mailing Address:

14960 COLLIER BLVD
NAPLES, FL 34119 US

New Mailing Address:

FEI Number: 65-0190740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEBOEST & STOCKMAN
BANK OF AMERICA CTR.
2030 MCGREGOR BLVD
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

CONDO LAW GROUP INC
2030 MCGREGOR BLVD
FORT MYERS, FL 33901 US

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: RICHARD DEBOEST JR

01/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: DICKEY-OLSEN, PAT
Address: 14960 COLLIER BLVD HOGG
City-St-Zip: NAPLES, FL 34119

Title: P () Delete
Name: ANDERSON, ED
Address: 14960 COLLIER BLVD #4113
City-St-Zip: NAPLES, FL 34119

Title: P () Delete
Name: ANDERSON, ED
Address: 144960 COLLIER BLVD , # 4113
City-St-Zip: NAPLES, FL 34119

Title: VP (X) Delete
Name: SULLIVAN, BOB
Address: 14960 COLLIER BLVD, 2088
City-St-Zip: NAPLES, FL 34119

Title: D (X) Delete
Name: MCKEEN, DAVE
Address: 14960 COLLIER BLVD #2049
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MCKEEN, DAVE
Address: 144960 COLLIER BLVD , # 2049
City-St-Zip: NAPLES, FL 34119

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: ED ANDERSON

PRES

01/13/2009

Electronic Signature of Signing Officer or Director

Date