


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 22, 2007 8:00 am**  
**Secretary of State**

02-22-2007 90021 041 \*\*\*\*61.25

<b>DOCUMENT # N36051</b> 1. Entity Name <b>CRYSTAL LANDINGS CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>861 SE MAYO DRIVE CRYSTAL RIVER FL 34429 US</b>			Mailing Address <b>861 SE MAYO DRIVE CRYSTAL RIVER FL 34429 US</b>		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip      Country		City & State Zip      Country		4. FEI Number <b>59-3219198</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b>  <b>SHUMWAY, DOROTHY 949 SE MAYO DRIVE CRYSTAL RIVER FL 34429</b>				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRANCATO, HENRY P O BOX 2041 CRYSTAL RIVER FL 34428	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D McPIKE, LINDA 845 SE MAYO DR CRYSTAL RIVER, FL 34429	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS MCPIKE, LINDA 845 SE MAYO DR CRYSTAL RIVER FL 34429	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	La Mondia, Lois 843 SE MAYO DR CRYSTAL RIVER, FL 34429	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AT SCHEMBER, DIANE 907 SE MAYO DR CRYSTAL RIVER FL 34429	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	La Mondie, Floyd 843 SE MAYO DR CRYSTAL RIVER, FL 34429	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P IVORY, RUTH 815 SE MAYO DR CRYSTAL RIVER FL 34429	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Keith, CAROL 951 SE MAYO DR CRYSTAL RIVER, FL 34429	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HUDSON, RICHARD 809 SE MAYO DR CRYSTAL RIVER FL 34429	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/Shumway, DOROTHY 949 SE MAYO DR CRYSTAL RIVER, FL 34429	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SHUMWAY, DOROTHY 949 SE MAYO DR CRYSTAL RIVER FL 34429	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/Shumway, DOROTHY 949 SE MAYO DR CRYSTAL RIVER, FL 34429	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:** Ruth Ivory RUTH IVORY 02/13/07 3525635844