FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

Mar 04 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N36327

(7)

Mailing Address

CRESCENT LAKE NEIGHBORHOOD ASSOCIATION, INC.

P.O. BOX 76065 St. Petersburg fl 33734		P.O. BOX 76065 ST. PETERSBURG FL 33734-6065			
US		US		3. Date Incorporated or Qualified 01/18/1990	3a. Date of Last Report 08/07/1996
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26			59-3012189	Not Applicable
Suite, Ap	Suite, Apt. #, etc. Suite, Apt. #				CO 75 A 150
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23]		28		Trust Fund Contribution	☐ Added to Fees
Zıp	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
24	25	29 3	0]		Yes X No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name					
FADRETEN TOEDS 11					
	AN, JAMES	Address (P.O. Box Number is Not Acceptable	6)		
O (E) EDE					
ST. PETERSBURG FL 33710 84 City T DE TE la Carrol 185 Zip Code 1					
1 2/ PP/EB9/80/26 FL 22 7/4 4					
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 617.0505, Florida Statutes.					
agent. I am familiar with, and accopt the obligations of, Seaton 617/1508, Florida Statutes.					
SIGNATURE	Signature, typed by violed name of registered agent	The second secon			2-20-11
12.	OFFICERS AND		13.	required when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE
THILE	SD	DELETE			
NAME	ALMY, VERONICA		1.2 NAME	EADBETT	EP FREDERICE
STREET ADDRESS			1.3 STREET ADDRESS	701-18HANN.	7, 1, 2, 0, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
CHTY-ST-ZIP	ST. PETERSBURG FL 33704		1.4 CITY-ST-ZIP	ST. PETENSBINI	F1 33704
TITLE	TD	DELETE	2.1 TITLE	PD TOI-18th BU.N. ST. PETERSBURG, VD HENDERSON, CAROL 1916-7th ST. N.	Channe Addition
NAME	BRENNAN, JAMES	-	2.2 NAME	HENDERSON, CAROL	O SHAPING
STREET ADDRESS	I amount and a superior and a superi		2.3 STREET ADDRESS	1916-7th ST. N.	
CITY-ST-ZIP	ST. PETERSBURG FL 33710		2. 4 CITY-ST-ZIP	ST. PETERSBURG, FL3	<i>3704</i>
TITLE	D	DELETE	3.1 TITLE		☐ Change ☑ Addition
NAME	CLEMMONS, TIM	<i>[</i>	3.2 NAME	CLARKE, JON.	2 3344,5
STREET ADDRESS	819 18TH AVENUE, NORTH	•	3.3 STREET ADDRESS	727-13th AV.N.	
CITY-ST-ZIP	ST. PETERSBURG FL 33704		3.4. CITY-ST-ZIP	ST. PETERSBURG, FL	33701
THILE	D	DELETE	4.1 TITLE	רל	Change N/I Addition
NAME	HENDERSON, CAROL		4, 2 NAME	CLARKE HILARY 727-13th AV.N. ST. PETERSBURG F	7
STREE1 ADDRESS	1916 7TH STREET, NORTH		4.3 STREET ADDRESS	727-13th AU.N.	·
CITY - S1 - ZIP	ST. PETERSBURG FL 33704		4.4 CITY-ST-ZIP	ST. PEJENSBURG F	L 33701
TITLE	D	DELETE	5.1 IIILE	υ	☐ Change ☐ Addition
NAME	MCLEMORE, LAURA		5.2 NAME	FOREMAN, PAULO 630-12 to AU.N.	— · -
STREET ADDRESS	700 13TH AVENUE, NORTH		5.3 STREET ADDRESS	630-12 th AU.N.	
CITY-ST-ZIP	ST. PETERSBURG FL 33701		5.4 CITY+ST-ZIP	ST. PETERSBURG, FL	33701
TITLE	D	DELETE	61	17	Change Addition
NAME	WOODWARD, ANGELA	(62 NAME	FOREMHN, ROXANN	, /
STREET ADDRESS	770 19TH AV N	·	6.3 STREET ADDRESS	FOREMAN, ROXANN 630-1241 AV.N.	
CITY-ST-ZIP	ST PETERSBURG FL 33704		6.4 CITY-ST-ZIP	DI PETERSBURG +L	33701
14. 1 do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Spation 110 07/3/6). Cloride Statuton & further next to 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, or on-an attachment with an address.					