

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36337

FILED
Mar 07, 2012
Secretary of State

Entity Name: CRYSTAL LAKES MANUFACTURED HOME COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

5010 COUNTRY LAKES DRIVE
FORT MYERS, FL 33905

New Principal Place of Business:

Current Mailing Address:

8270 COLLEGE PKWY #104
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-0259325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONRAD, DEBBIE
8270 COLLEGE PKWY #104
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: MEHAFFEY, JUDY
Address: 5280 SILK OAK AVENUE
City-St-Zip: FORT MYERS, FL 33905

Title: TSD
Name: RAFUSE, THOMAS
Address: 5310 MANATEE BAY LANE
City-St-Zip: FORT MYERS, FL 33905

Title: PD
Name: FRASCHE, NICHOLAS
Address: 5169 FIDDLELEAF DRIVE
City-St-Zip: FORT MYERS, FL 33905

Title: VPD
Name: TRUESDELL, DOREEN
Address: 5073 FIDDLELEAF
City-St-Zip: FORT MYERS, FL 33905

Title: D
Name: ANDREWS, ROBERT
Address: 3104 PACIFIC ST SUITE 300
City-St-Zip: MINNEAPOLIS, MN 55411

I hereby 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 all other like empowered.

SIGNATURE: THOMAS RAFUSE

TSD

03/07/2012

Electronic Signature of Signing Officer or Director

Date