

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # N42547

1. Entity Name
CRYSTAL WATERS HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**2355 CRYSTAL BEACH RD
WINTER HAVEN, FL 33880 US**

Mailing Address
**P.O. BOX 1931
WINTER HAVEN, FL 33883 US**



04082006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3190818

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CLINE, DEBRA L.
146 AVENUE B., N.W.
WINTER HAVEN, FL 33881**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when rechartering)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PO
SMITH, JERRY
7 CRYSTAL WATER DR
WINTER HAVEN, FL 33880**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
WHITE, DON
12 CRYSTAL WATERS DR
WINTER HAVEN, FL 33880**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
WHITMIRE, BEVERLY
P.O. BOX 1931, 2355 CRYSTAL BEACH RD
WINTER HAVEN, FL 33880**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WOOD, ROBERT
5 CRYSTAL WATERS DR
WINTER HAVEN, FL 33880**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**O
WHITE, DON
12 CRYSTAL WATERS DR.
WINTER HAVEN, FL 33880**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000515004
04/29/06-80193-018 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Beverly J. Whitmire*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/13/06 (863) 299-7149

Date

Daytime Phone #