

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42547

FILED  
Feb 17, 2009  
Secretary of State

**Entity Name:** CRYSTAL WATERS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2355 CRYSTAL BEACH RD  
WINTER HAVEN, FL 33880 US

**New Principal Place of Business:**

**Current Mailing Address:**

5 CRYSTAL WATERS  
WINTER HAVEN, FL 33880 US

**New Mailing Address:**

**FEI Number:** 59-3190818

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CLINE, DEBRA L.  
146 AVENUE B., N.W.  
WINTER HAVEBN, FL 33881 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: S ( ) Delete  
Name: WOOD, VICKI  
Address: 5 CRYSTAL WATERS  
City-St-Zip: WINTER HAVEN, FL 33880

Title: P ( ) Delete  
Name: HUNTER, JEFF  
Address: 12 CRYSTAL WATERS  
City-St-Zip: WINTER HAVEN, FL 33880

Title: ML ( ) Delete  
Name: THACLEY, GLEN  
Address: 6 CRYSTAL WATERS  
City-St-Zip: WINTER HAVEN, FL 33880

Title: PD ( ) Delete  
Name: WOOD, ROBERT  
Address: 5 CRYSTAL WATERS DR  
City-St-Zip: WINTER HAVEN, FL 33880

Title: D ( ) Delete  
Name: EASON, CHESTER  
Address: 17 CRYSTAL WATERS DR.  
City-St-Zip: WINTER HAVEN, FL 33880

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S (X) Change ( ) Addition  
Name: WOOD, VICKI  
Address: 5 CRYSTAL WATERS  
City-St-Zip: WINTER HAVEN, FL 33880

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

Title: ML (X) Change ( ) Addition  
Name: THACKER, GLEN  
Address: 6 CRYSTAL WATERS  
City-St-Zip: WINTER HAVEN, FL 33880

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: VICKI WOOD

SEC

02/17/2009

Electronic Signature of Signing Officer or Director

Date