2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2008
Secretary of State

DOCUMENT# N43360

Entity Name: CRESCENT POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2504 CRESCENT PT COURT
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

2504 CRESCENT PT COURT
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION INFORMATION SERVICES, INC.
502 E PARK AVE
TALLAHASSEE, FL 32301 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 (X) Delete
Name: ABRUZZO, VINCENT
Address: 2503 CRESCENT POINT COURT
City-St-Zip: WINDERMERE, FL

Title: P ( ) Delete
Name: DOWNS, ARTHUR
Address: 2509 CRESCENT POINTE CT.
City-St-Zip: WINDERMERE, FL

Title: T ( ) Delete
Name: GOOD, DAVID
Address: 2504 CRESCENT POINTE COURT
City-St-Zip: WINDERMERE, FL

Title: D (X) Delete
Name: FRIES, GARY
Address: 2515 CRESCENT POINTE CT
City-St-Zip: WINDERMERE, FL

Title: D (X) Delete
Name: JOLLEY, RODNEY
Address: 2516 CRESCENT POINTE CT.
City-St-Zip: WINDERMERE, FL

Title: D (X) Delete
Name: RENZULLI, JEFF
Address: 2510 CRESCENT POINTE COURT
City-St-Zip: WINDERMERE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition
Name: DOWNS, ARTHUR
Address: 2509 CRESCENT POINTE COURT
City-St-Zip: WINDERMERE, FL

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

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

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: DAVID GOOD T 03/03/2008

Electronic Signature of Signing Officer or Director — Date