

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51141

FILED  
Mar 22, 2012  
Secretary of State

**Entity Name:** CRYSTAL BAY ASSOCIATION, INC.

**Current Principal Place of Business:**

19620 PINES BLVD  
SUITE 205  
PEMBROKE PINES, FL 33029 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O PINES PROPERTY MANAGEMENT  
PO BOX 820100  
SO FLORIDA, FL 33082 US

**New Mailing Address:**

**FEI Number:** 65-0420197      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

STEVENS & GOLDWYN, P.A.  
2 SOUTH UNIVERSITY DR  
# 315  
PLANTATION, FL 33324 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: DP  
Name: HYMSON, CAROL  
Address: 564 SW 180 AVE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DT  
Name: MELENDEZ, SAL  
Address: 17831 SW 4 COURT  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DVP  
Name: WEINTRAUB, STUART  
Address: 540 SW 178TH WAY  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DS  
Name: PEREZ, ALEXANDER  
Address: 541 SW 178 WAY  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D  
Name: CORDERO, JACKIE  
Address: 524 SW 180 AVE  
City-St-Zip: PEMBROKE PINES, FL 33029

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: CAROL HYMSON

DP

03/22/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date