

## ANNUAL REPORT

DOCUMENT # N93000001658

1. Entity Name  
CRESCENT LAKE HOMEOWNERS ASSOCIATION OF  
POLK COUNTY, INC.



Principal Place of Business  
6623 CRESCENT LAKES DRIVE  
LAKELAND, FL 33813 US

Mailing Address  
P O BOX 6684  
LAKELAND, FL 33807 US

**FILED**  
**May 23, 2006 8:00 am**  
**Secretary of State**

05-23-2006 90011 014 \*\*\*\*61.25



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02262006

Chg-NP

CR2E037 (11/05)

City &amp; State

City &amp; State

4. FEI Number  
59-3199370

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

## 6. Name and Address of Current Registered Agent

## 7. Name and Address of New Registered Agent

JACKSON, WINGAYE A III  
6623 CRESCENT LAKES DRIVE  
LAKELAND, FL 33813

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

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**

**Make check payable to  
Florida Department of State**

## 10. OFFICERS AND DIRECTORS

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete  
NAME JACKSON, WINGATE A III  
STREET ADDRESS 6623 CRESCENT LAKES DRIVE  
CITY-ST-ZIP LAKELAND, FL 33813

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP ☒ Delete  
NAME MILLER, MARK  
STREET ADDRESS 6631 CRESCENT LAKE DRIVE  
CITY-ST-ZIP LAKELAND, FL 33813

TITLE ☒ Change ☐ Addition  
NAME VP  
STREET ADDRESS DAVIS, TOM  
CITY-ST-ZIP 232 CRESCENT LAKE COURT  
LAKELAND, FL 33813

TITLE DS ☐ Delete  
NAME BURKLIN, MARTA  
STREET ADDRESS 6572 CRESCENT LAKE DRIVE  
CITY-ST-ZIP LAKELAND, FL 33813

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DT ☐ Delete  
NAME THOMPSON, JO  
STREET ADDRESS 6751 CRESCENT LAKE DR.  
CITY-ST-ZIP LAKELAND, FL 33813

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 *Wingate A. Jackson III*

2/26/06

(863)709 1992