

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001053

FILED
Apr 28, 2008
Secretary of State

Entity Name: CRYSTAL BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5401 S. KIRKMAN RD., STE. 450
ORLANDO, FL 32819 US

New Principal Place of Business:

882 JACKSON AVE.
WINTER PARK, FL 32789 US

Current Mailing Address:

5401 S. KIRKMAN RD., STE. 450
ORLANDO, FL 32819 US

New Mailing Address:

882 JACKSON AVE.
WINTER PARK, FL 32789 US

FEI Number: 59-3305319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT PROFESSIONALS, INC.
5401 S. KIRKMAN RD., STE. 450
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

BRACKIN, ANDREA
882 JACKSON AVE.
WINTER PARK, FL 32789 US

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: ANDREA BRACKIN

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOSKOWITZ, CAROLYN
Address: 12526 CASTLEMAIN TRAIL
City-St-Zip: ORLANDO, FL 32828

Title: VPD () Delete
Name: BRECHER, JILL N
Address: 12551 CASTLEMAIN TRAIL
City-St-Zip: ORLANDO, FL 32828

Title: STD () Delete
Name: WALKER, CRYSTLE
Address: 12514 CASTLE MAIN TRAIL
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GIRAULT, JOLENE
Address: 12633 CASTLEMAIN TRAIL
City-St-Zip: ORLANDO, FL 32828

Title: VPD (X) Change () Addition
Name: WOLLER, TOM
Address: 12424 CASTLEMAIN TRAIL
City-St-Zip: ORLANDO, FL 32828

Title: STD (X) Change () Addition
Name: RUBINSON, SUSAN
Address: 12626 CASTLEMAIN TRAIL
City-St-Zip: ORLANDO, FL 32828

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: JOLENE GIRAULT

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date