


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 8:00 am
Secretary of State

04-04-2008 90031 013 ****61.25

DOCUMENT # N94000004284 1. Entity Name CRESCENT LAKES AT BOCA RATON HOMEOWNERS' ASSOCIATION, INC.			
Principal Place of Business C/O CAS MANAGEMENT INC. 951 BROKEN SOUND PKWY STE-250 BOCA RATON, FL 33487 US		Mailing Address C/O CMC MANAGEMENT INC. 2994 JOC ROAD, SUITE B GREENACRES, FL 33467 US	
2. Principal Place of Business - No P.O. Box # C.A.S. REALTY MANAGEMENT, LLC 1901 S. Congress Avenue Suite 480 Boynton Beach, FL 33426		3. Mailing Address SAME Suite, Apt. #, etc. City & State Zip Country	
4. FEI Number 65-0561537		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		02262008 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent GERRISH, SCOT A. C/O CAS 951 BROKEN SOUND PKWY STE 250 BOCA RATON, FL 33487		7. Name and Address of New Registered Agent C.A.S. REALTY MANAGEMENT, LLC Street Address (P.O. Box Number is Not Acceptable) 1901 S. CONGRESS AVE, STE 480 City BOYNTON BEACH FL Zip Code 33426	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling)</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 NAME STREET ADDRESS CITY-ST-ZIP	TD FISCHER, RICHARD 22850 BARRISTER DRIVE BOCA RATON, FL 33433 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VACCA, TONY 22858 STERLING LAKES DR BOCA RATON, FL 33433 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WOLFSON, DEANNA 8874 THAMES RIVER DR BOCA RATON, FL 33433 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HAFFNER, ROBERT 8751 CHANNELL TERR BOCA RATON, FL 33433 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALCOLM, KASS 8868 THAMES RIVER DR BOCA RATON, FL 33433 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 another like empowered.			
SIGNATURE: <i>[Signature]</i> Inwio York		Date 03/04/08 Daytime Phone # 561-82-1907	

40059494



ATTACHMENT

#N94000004284

40059494

CRESCENT LAKES HOMEOWNERS ASSOCIATION, INC.

Board of Directors

2008

Tony Vacca
1901 S. Congress Ave., Suite 480
Boynton Beach, FL 33436

President

Irwin York
1901 S. Congress Ave., Suite 480
Boynton Beach, FL 33436

Vice President

(add)

Deanna "Dolly" Wolfson
1901 S. Congress Ave., Suite 480
Boynton Beach, FL 33436

Secretary

Richard Fischer
1901 S. Congress Ave., Suite 480
Boynton Beach, FL 33436

Treasurer

Malcolm Kass
1901 S. Congress Ave., Suite 480
Boynton Beach, FL 33436

Director

Dr. Alan Rosen
1901 S. Congress Ave., Suite 480
Boynton Beach, FL 33436

Director

(add)

Julius Cohen
1901 S. Congress Ave., Suite 480
Boynton Beach, FL 33436

Director

(add)