

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001358

FILED  
Jul 08, 2006  
Secretary of State

Entity Name: CROISSANT PARK CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

P.O. BOX 13117  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 13117  
FORT LAUDERDALE, FL 33316

**New Mailing Address:**

FEI Number: 59-2738942      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

STEPHENSON, GLEN  
833 SW 17TH STREET  
FORT LAUDERDALE, FL 33315      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CUNNIFF, HEATHER  
Address: 817 SW 19TH ST  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: S ( ) Delete  
Name: BOWKER, JOSEPHINE  
Address: 505 SW 18 ST  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: D ( ) Delete  
Name: ANASTON-KARAS, JIM  
Address: 612 SW 16TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: D ( ) Delete  
Name: ANASTON-KARAS, KIM  
Address: 612 SW 16TH STREET  
City-St-Zip: FT LAUDERDALE, FL 33315

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: VP (X) Change ( ) Addition  
Name: MEONI, ALISON  
Address: 817 SW 19TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: TR (X) Change ( ) Addition  
Name: STEPHENSON, GLEN  
Address: 833 SW 17TH STREET  
City-St-Zip: FT LAUDERDALE, FL 33315

I hereby certify that the information supplied with this filing does not qualify for the 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: GLEN B STEPHENSON

TR

07/08/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date