## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000002028

Apr 30, 2008 Secretary of State

Entity Name: CRESCENT SANDPIPER CONDOMINIUM, INC.

**Current Principal Place of Business: New Principal Place of Business:** 7950 A1A SOUTH ST. AUGUSTINE, FL 32080 **Current Mailing Address: New Mailing Address:** 7950 A1A SOUTH ST. AUGUSTINE, FL 32080 FEI Number: 59-1433463 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLIAMS, SANDY G 9042 WARWICKSHIRE ROAD JACKSONVILLE, FL 32257 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: BM () Delete (X) Change ( ) Addition BAXTER, JON BAXTER, JON Name: Name: 9809 SW 33RD LN. Address: 9809 SW 33RD LN. Address: City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: GAINESVILLE, FL 32608 Title: () Delete Title: ВМ (X) Change ( ) Addition HAILE, GRAHAM Name: FERENCE, EARL Name: Address: 7408 20TH AVE. NW Address: 1101 NW 107TH TERRACE City-St-Zip: BRADENTON, FL 34209 City-St-Zip: GAINESVILLE, FL 32606 Title: () Delete Title: () Change () Addition EVERSON, WILLIAM Name: Name: 13987 CHERRYWOOD DR. N. Address: Address: City-St-Zip: BAXTER, MN 56425 City-St-Zip: (X) Change ( ) Addition Title: TR ( ) Delete Title: TR Name: DECKER, ROBERT Name: HILL, MARCHETA Address: 1748 CASSELBERRY RD. Address: 7950 A1A SOUTH, UNIT #217 City-St-Zip: LOUISVILLE, KY 40205 City-St-Zip: ST. AUGUSTINE, FL 32080 Title: () Delete Title: () Change () Addition HARRILL, DAVID Name: Name: 3540 BEAUCLERC CIR. N. Address: Address: City-St-Zip: JACKSONVILLE, FL 32257 City-St-Zip: Title: () Delete Title: () Change () Addition WINKERT, PETER Name: Name: Address: P.O. BOX 202 Address: CAZENOVIA, NY 13035 City-St-Zip: City-St-Zip:

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: WILLIAM EVERSON PR 04/30/2008