2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 06, 2008 08:00 AM DOCUMENT # N96000003310 1. Entity Name **Secretary of State** CRYSTAL LAKE OAKS HOMEOWNERS ASSOCIATION. INC. Principal Place of Business Mailing Address 3017 CRYSTAL OAK COURT ORLANDO FL 32806 3017 CRYSTAL OAK COURT ORLANDO FL 32806 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite. Aut. #. etc. Suite, Apt. #. etc. 1st MOORE CR2E037 (10/07) City & State City & State Applied For 4. FEI Number 59-2362573 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRANDENBURG, WILLIAM P Street Address (P.O. Box Number is Not Acceptable) 3017 CRYSTAL OAK COURT ORLANDO FL 32806 City 6. 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 DATE Signature, typed or crimted name of registered agent and title. I applicable (NOTE: Begistered Agent signabure required when reinstabing) ME BUILDING THE PARTY OF THE PARTY. FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10 ☐ Delete Change TITLE TITLE U000000817729 BRANDENBURG, WILLIAM P NAME NAME 02/15/08-80014-012 61.25 3017 CRYSTAL OAK COURT STREET ADDRESS STREET ADDRESS CITY - ST - ZIP ORLANDO FL 32806 CITY-ST-ZIP PD ☐ Delete TITLE ☐ Change Addition TITLE PERRY, TIM NAME NAME 3028 CRYSTAL OAK COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32806 CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete SMITH, RICHARD W NAME 3029 CRYSTAL OAK CT STREET ADDRESS STREET ACCIPESS CITY-ST-ZIP ORLANDO FL 32806-6523 CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-Z:P ☐ Delete ☐ Change Addition TOTAL THE NAME STREET AUDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Dalete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP

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(407) 816 1254 WILLIAM P. BRANDENBURG

if changed, or on an attachment with an address, with all other like empowered.

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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