

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004345

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: CRYSTAL VIEW OWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

12815 HWY 98 W  
SUITE 100  
MIRAMAR BEACH, FL 32550

## Current Mailing Address:

P.O. BOX 1779  
DESTIN, FL 32540

## New Principal Place of Business:

12815 HIGHWAY 98 WEST  
SUITE 100  
MIRAMAR BEACH, FL 32550

## New Mailing Address:

FEI Number: 59-3400544      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, LORETTA W CAM  
NEWMAN DAILEY RESORT PROPERTIES  
12815 HIGHWAY 98 WEST, SUITE 100  
MIRAMAR BEACH, FL 32550 US

## Name and Address of New Registered Agent:

SMITH, LORETTA W CAM  
12815 HIGHWAY 98 WEST  
SUITE 100  
MIRAMAR BEACH, FL 32550 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: LORETTA SMITH

04/16/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LARSON, DAVE  
Address: 1300 RIVER HOLLOW CT  
City-St-Zip: SUWANEE, GA 30024

Title: VP ( ) Delete  
Name: GARVEY, RANDY  
Address: 10525 RED WING CIRCLE  
City-St-Zip: OLATHE, KS 66061

Title: ST ( ) Delete  
Name: MOCK, RANDY  
Address: 2440 SCENIC GULF HWY # 202  
City-St-Zip: MIRAMAR BEACH, FL 32550

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: DAVE LARSON

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date