

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED May 18 1998 8:00am Secretary of State

DOCUMENT # N96000006245 (2)

1. Corporation Name CRESTHAVEN CMC ASSOCIATION, INC.

Principal Place of Business 3500 NE 16 TERRACE POMPANO BEACH FL 33064 Mailing Address 3500 NE 16 TERRACE POMPANO BEACH FL 33064

3. Date Incorporated or Qualified 12/09/1996 4. FEI Number 59-6145662 Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 22 City & State 27 City & State 23 Zip 25 Country 29 Zip 30 Country

5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 7. Is this nonprofit corporation a homeowners association? 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

9. Name and Address of Current Registered Agent BROWN, SARAH 3500 NE 16 TERRACE POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS PD FOSTER, SUSAN 1671 NE 32ND CT. POMPANO BEACH F VD MARTIN, AMY 1861 NE 30TH CT POMPANO BEACH FL TD FOSTER, JOHN 1671 NE 32ND CT POMPANO BEACH FL SD BROWN, SARAH 1364 NE 25TH CT POMPANO BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sarah Brown, Secretary 4/30/98 954-463-6581 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0025489

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