

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90226 037 ****70.00

DOCUMENT # N96000006245

1. Entity Name
CRESTHAVEN CIVIC ASSOCIATION, INC.



Principal Place of Business

**3500 NE 16 TERRACE
POMPANO BEACH FL 33064**

Mailing Address

**1240 NE 33 COURT
POMPANO BEACH FL 33064**

2. Principal Place of Business

3. Mailing Address

1460 NE 32 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

POMPANO BEACH, FL

Zip

Country

Zip

Country

33064

USA

4. FEI Number **59-6145662**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FRENDAHL, BRUCE
1460 NE 32 ST
POMPANO BEACH FL 33064**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **FEINBERG, ANDY**
STREET ADDRESS **1440 NE 32ND PLACE**
CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **PAST PRESIDENT / DIRECTOR** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VD** ☐ Delete
NAME **SPENCE, DAVE**
STREET ADDRESS **1240 NE 33RD COURT**
CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **DIRECTOR** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **SPENCE, DIANA M**
STREET ADDRESS **1240 NE 33 COURT**
CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **FRENDAHL, BRUCE**
STREET ADDRESS **1460 NE 32 ST**
CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **PRESIDENT / DIRECTOR** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **FIRST VICE PRESIDENT / DIRECTOR** ☐ Delete
NAME **DENNIS MYERS**
STREET ADDRESS **1301 NE 32 PLACE**
CITY-ST-ZIP **POMPANO BEACH, FL 33064**

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SECRETARY / DIRECTOR** ☐ Delete
NAME **SARAH BROWN**
STREET ADDRESS **1364 NE. 25 COURT**
CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE: **DIANA M SPENCE**

1/27/03 950-941-6331

CR2E037 (10/02)