2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

LAKELAND, FL 33813

Mar 29, 2006 8:00 am Secretary of State DOCUMENT # N96000006294 03-29-2006 90114 050 ****61.25 CRESCENT HILLS HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address ען עעע *ק*ען P OB OX 7613 **629 CRESCENT HILLS PLACE** LAKELAND, FL 33807-7613 LAKELAND, FL 33813 3 6 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 03272006 Chg-NP CR2E037 (11/05) City & State Applied For City & State 59-3426053 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TYRE, JUNE Street Address (P.O. Box Number is Not Acceptable) **627 CRESCENT HILLS PLACE** LAKELAND, FL 33813 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 \$5.00 May Be Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to Trust Fund Contribution. Added to Fees Florida Department of State Due by May 1, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. SD TUTE VP15/D Change ☐ Addition ☐ Delete TITLE Tyre June 627 crescent Hills Place Lakeland FL 33813 TYRE, JUNE NAME NAME STREET ADDRESS **627 CRESCENT HILLS PL** STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33813 CITY-ST-7IP Change ☐ Addition TIME **VPD** Delete TITLE Schuler, Richard SCHULER, RICHARD NAME NAME 650 Crescent Hills Drive STREET ADDRESS 650 CRESCENT HILLS PLACE STREET ADDRESS Lakeland FL 33813 LAKELAND, FL 33813 CITY-ST-ZIP CITY-ST-ZIP Addition Delete Change TITLE TITLE murray melissa 634 Crescent Hills Way Lakeland Fr 33813 WOLVERTON, WALTER NAME NAME STREET ADORESS 645 CRESCENT HILLS DR STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33813 CITY-ST-ZIP Addition **☑** Delete ☐ Change TITLE TITLE Shields Judy 710 cresent Hills Drive WATTS, SONYA NAME NAME 705 CRESCENT HILLS DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33813 CITY-ST-7IP Lakeland FL 33813 ☐ Delete TITLE ☐ Change ■ Addition TD TILLE ENGLISH, LINDA NAME NAME **624 CRESCENT HILLS PLACE** STREET ADDRESS STREET ADDRESS

FILED

☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same logal effect as if made under certify 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

TITLE

NAME

☐ Delete

MAL P. English Linda P. English
SIGNATURE AND TYPED OR PHINTED HAME OF SIGNING OFFICER OR DIRECTOR 863-709-0071