

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000665

FILED
Jan 09, 2006
Secretary of State

Entity Name: CRYSTAL BAY AT POLO CLUB HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6445 POLO POINTE WAY
DELRAY BEACH, FL 33484 US

New Principal Place of Business:

6453 POLO POINTE WAY
DELRAY BEACH, FL 33484 US

Current Mailing Address:

6445 POLO POINTE WAY
STE 302
DELRAY BEACH, FL 33484 US

New Mailing Address:

6453 POLO POINTE WAY
DELRAY BEACH, FL 33484 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SCHWARTZ, HOWARD L P. A.
ONE PARK PLACE
621 NW 53RD STREET STE 390
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TREROTOLI, MICHAEL
Address: 6445 POLO POINTE WAY
City-St-Zip: DELRAY BEACH, FL 33484

Title: VTD () Delete
Name: LOEFFLER, JOHANN F
Address: 6456 POLO POINTE WAY
City-St-Zip: DELRAY BEACH, FL 33484

Title: SD () Delete
Name: HARRIS, JEFFREY
Address: 6428 POLO POINTE WAY
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: BRECHER, MARILYN
Address: 6444 POLO POINTE WAY
City-St-Zip: DELRAY BEACH, FL 33484

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BECK, MICHAEL
Address: 6453 POLO POINTE WAY
City-St-Zip: DELRAY BEACH, FL 33484

Title: TD (X) Change () Addition
Name: LOEFFLER, JOHANN F
Address: 6456 POLO POINTE WAY
City-St-Zip: DELRAY BEACH, FL 33484

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

Title: VD (X) Change () Addition
Name: GORDON, ERIC
Address: 6404 POLO POINTE WAY
City-St-Zip: DELRAY BEACH, FL 33484

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHANN F LOEFFLER

TD

01/09/2006

Electronic Signature of Signing Officer or Director

Date