2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# N97000005045

Entity Name: CRESCENT CAYE OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

81 COQUINA PLACE
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 21928
COLUMBUS, OH 43221 US

New Mailing Address:

FEI Number: 59-2775405 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAIBERL, STEFAN B
71 COQUINA PLACE
SANTA ROSA BEACH, FL 32459 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:	DP	( ) Delete
Name:	SHEPHERD, JIM	
Address:	167 COQUINA PLACE	
City-St-Zip:	SANTA ROSA BEACH, FL 32459	
Title:	DVP	( ) Delete
Name:	DAIBERL, STEFAN	
Address:	71 COQUINA PLACE	
City-St-Zip:	SANTA ROSA BEACH, FL 32459	
Title:	DT	( ) Delete
Name:	KLEKOTKA, EDWARD M	
Address:	3450 RIVER RHONE LANE	
City-St-Zip:	COLUMBUS, OH 43221 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	DT	(X) Change ( ) Addition
Name:	KLEKOTKA, EDWARD M	
Address:	P.O. BOX 21928	
City-St-Zip:	COLUMBUS, OH 43221 US	

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: EDWARD M. KLEKOTKA DT 01/08/2009

Electronic Signature of Signing Officer or Director — Date