2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 17, 2006 8:00 am DOCUMENT # N98000000720 **Secretary of State** 1. Entity Name 02-17-2006 90081 027 ****61.25 CRYSTAL COVE ESTATES HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 23150 SANDALFOOT-PLAZA DR 23150 SANDALFOOT PLAZA DR BOCA RATON FL 33428 **BOCA RATON FL 33428** 2. Principal Place of Business 3. Mailing Address . Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 65-0935133 Not Applicable Zip Zio Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name PRIME MANAGEMENT GROUP INC. Street Address (P.O. Box Number is Not Acceptable) 23150 A SANDALFOOT PLAZA DR **BOCA RATON FL 33428** Zip Code City 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) Co. Let Selected Selection and FILE NOW: FEE IS \$61.25 \$5.00 May Be 9. Election Campaign Financing Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition TITLE Detete TITLE BELLACK, LARRY NAME NAME 11636 KEnsingtowct 11636 KENSINGTON CT STREET ADDRESS STREET ADDRESS BOLARATON, FL 33428 **BOCA RATON FL 33428** City-St-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE PRAY, DANIEL NAME NAME 11549 KENSINGTON CT STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33428** CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE VPD ☐ Delete TITLE MAHTI, JUAN 200 1557 KENSINGTON STREET ADDRESS 11557 KINGSINGTON ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33428** TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

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JUAN M. MAUTI PRSI

2/3/06 56/487/966

FILED