

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001163

FILED
Mar 09, 2009
Secretary of State

Entity Name: CRYSTAL COVE OF PARKER LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6719 WINKLER ROAD
SUITE 200
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

6719 WINKLER ROAD
SUITE 200
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-0815540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLIANT PROPERTY MANAGEMENT, LLC
6719 WINKLER ROAD
SUITE 200
FORT MYERS, FL 33919 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: PS () Delete
Name: YACKOSKI, DIANE
Address: 14800 CRYSTAL COVE CT #904
City-St-Zip: FORT MYERS, FL 33919

Title: VP () Delete
Name: MEDERIOS, DENNIS
Address: 9220 LALIQUE LN UNIT #1201
City-St-Zip: FORT MYERS, FL 33919

Title: TD () Delete
Name: BRYANT, SUSAN
Address: 1400 CRYSTAL COVE CT. #901
City-St-Zip: FORT MYERS, FL 33919

Title: CD () Delete
Name: TULLIS, HERB
Address: 9200 LALIQUE LN #1501
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: NEEDLEMAN, WILBERT
Address: 14810 CREPTAR COVE #801
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: YACKOSKI, DIANE
Address: 14800 CRYSTAL COVE CT #904
City-St-Zip: FORT MYERS, FL 33919

Title: VPS (X) Change () Addition
Name: MEDERIOS, DONNA
Address: 9220 LALIQUE LN UNIT #1201
City-St-Zip: FORT MYERS, FL 33919

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

Title: D (X) Change () Addition
Name: CIUFETELLI, MIKE
Address: 14830 CRYSTAL COVE CT. #604
City-St-Zip: FT. MYERS, FL 33919

Title: PD (X) Change () Addition
Name: BONANNO, JEROME
Address: 14801 CRYSTAL COVE CT. #1004
City-St-Zip: FT. MYERS, FL 33919

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: SUSAN BRYANT

TD

03/09/2009

Electronic Signature of Signing Officer or Director

Date