

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002261

FILED
Feb 25, 2009
Secretary of State

Entity Name: CROWN POINT BUSINESS PARK ASSOCIATION, INC.

Current Principal Place of Business:

P.O.BOX 194
PLYMOUTH, FL 32768

New Principal Place of Business:

2803 PONKAN PINES RD.
PLYMOUTH, FL 32768

Current Mailing Address:

P.O.BOX 194
PLYMOUTH, FL 32768

New Mailing Address:

FEI Number: 59-3569163 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CREEDEN, KEVIN
703 HENNIS RD.
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

COLES, BONNIE
2803 PONKAN PINES RD..
PLYMOUTH, FL 32768 US

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: BONNIE COLES

02/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CREEDEN, KEVIN
Address: 703 HENNIS RD
City-St-Zip: WINTER GARDEN, FL 34787

Title: V () Delete
Name: CREEDEN, CHARLES
Address: 703 HENNIS RD
City-St-Zip: WINTER GARDEN, FL 34787

Title: D () Delete
Name: MAMARAJ, HEMONT
Address: 1215 CROWN POINT CIR
City-St-Zip: WINTER GARDEN, FL 34787

Title: T (X) Delete
Name: COLES, BONNIE E
Address: P.BOX 194
City-St-Zip: PLYMOUTH, FL 32768

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CREEDEN, KEVIN
Address: 703 HENNIS RD
City-St-Zip: WINTER GARDEN, FL 34787

Title: V P (X) Change () Addition
Name: CREEDEN, CHARLES
Address: 703 HENNIS RD
City-St-Zip: WINTER GARDEN, FL 34787

Title: DIR. (X) Change () Addition
Name: MAMARAJ, HEMONT
Address: 1215 CROWN POINT CIR
City-St-Zip: WINTER GARDEN, FL 34787

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

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: KEVIN CREEDEN

P

02/25/2009

Electronic Signature of Signing Officer or Director

Date