

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006372

FILED
Jun 23, 2009
Secretary of State

Entity Name: CRYSTAL FALLS PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

P.O.BOX 231
WINTER BEACH, FL 32971

New Principal Place of Business:

6765 49TH COURT
VERO BEACH, FL 32967

Current Mailing Address:

P.O.BOX 231
WINTER BEACH, FL 32971

New Mailing Address:

P.O. BOX 231
WINTER BEACH, FL 32971

FEI Number: 30-0259978 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCKINNON, CHARLES W ESQ
3055 CARDINAL DR #302
VERO BEACH, FL 32963 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: BIXBY, ALLAN
Address: 6720 49TH COURT
City-St-Zip: VERO BEACH, FL 32967

Title: TD () Delete
Name: HOOPER, DAVID A
Address: 4820 66TH PLACE
City-St-Zip: VERO BEACH, FL 32967

Title: SD () Delete
Name: ALLEN, LEONA A
Address: 6765 49TH CT
City-St-Zip: VERO BEACH, FL 32967

Title: D () Delete
Name: WALTERS, PETE
Address: 4800 66TH LANE
City-St-Zip: VERO BEACH, FL 32967

Title: VP () Delete
Name: BORELLI, ROBERT
Address: 6695 49TH CT
City-St-Zip: VERO BEACH, FL 32967

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: PARSONS, LINDA
Address: 4820 66TH LANE
City-St-Zip: VERO BEACH, FL 32967

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

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

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

Title: PD (X) Change () Addition
Name: BORELLI, ROBERT
Address: 6695 49TH CT
City-St-Zip: VERO BEACH, FL 32967

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: DAVID HOOPER

TD

06/23/2009

Electronic Signature of Signing Officer or Director

Date