

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712063

**Entity Name:** CRYSTAL COURT NO. 4 CONDOMINIUM, INC.

**Current Principal Place of Business:**

C/O WEST BROWARD COMM MGMT  
820 SOUTH STATE ROAD 7  
PLANTATION, FL 33317

**Current Mailing Address:**

C/O WEST BROWARD COMM MGMT  
820 SOUTH STATE ROAD 7  
PLANTATION, FL 33317 US

**FEI Number:** 59-2397748

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FIORE, ANGELA  
WEST BROWARD COMM MGMT  
820 SOUTH STATE ROAD 7  
PLANTATION, FL 33317 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            TORCHIA, KAREN  
Address        C/O WEST BROWARD COMM MGMT  
                  820 SOUTH STATE ROAD 7  
City-State-Zip: PLANTATION FL 33317

Title            VP  
Name            COUVILLION, MARK  
Address        C/O WEST BROWARD COMM MGMT  
                  820 SOUTH STATE ROAD 7  
City-State-Zip: PLANTATION FL 33317

Title            SECRETARY  
Name            PETERSON, VINCENT  
Address        C/O WEST BROWARD COMM MGMT  
                  820 SOUTH STATE ROAD 7  
City-State-Zip: PLANTATION FL 33317

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARK COUVILLION

**VICE PRESIDENT**

**01/02/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date