

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000008549

**Entity Name:** CROOKED LAKE TERRACE HOMEOWNERS ASSOCIATION, INC**Current Principal Place of Business:**NO STREET ADDRESS  
EUSTIS, FL 32726**Current Mailing Address:**P.O. BOX 952  
EUSTIS, FL 32727**FEI Number:** 30-0011855**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLANKENSHIP, JOHN  
1748 LAKE TERRACE DR  
EUSTIS, FL 32726 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	DV
Name	MARRERO, LAURA
Address	1851 LAKE TERRACE DR
City-State-Zip:	EUSTIS FL 32726

Title	D
Name	DI SCALA, ANTHONY
Address	2685 MERCEDES CIRCLE
City-State-Zip:	EUSTIS FL 32726

Title	DPDT
Name	BLANKENSHIP, JOHN
Address	1748 LAKE TERRACE DR
City-State-Zip:	EUSTIS FL 32726

Title	D
Name	PIGNATO, SAL
Address	1752 LAKE TERRACE DR
City-State-Zip:	EUSTIS FL 32726

Title	DS
Name	SHIRLEY, JIM
Address	1819 LAKE TERRACE DR
City-State-Zip:	EUSTIS FL 32726

*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:** JOHN I BLANKENSHIP**PRESIDENT****02/03/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date