

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03531

**FILED**  
**Mar 29, 2016**  
**Secretary of State**  
**CC3470513628**

**Entity Name:** CRYSTAL VILLAS OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

CRYSTAL VILLAS OWNERS ASSOC, INC.  
2850 SCENIC HWY 98  
DESTIN, FL 32541

**Current Mailing Address:**

CRYSTAL VILLAS OWNERS ASSOC., INC.  
50 MONACO STREET  
MIRAMAR BEACH, FL 32550 US

**FEI Number:** 59-2686402

**Certificate of Status Desired:** No

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

COTTLE, JOHN  
BECKER & POLIAKOFF  
348 MIRACLE STRIP PKWY SW STE 7  
FORT WALTON BEACH, FL 32548 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:** JOHN COTTLE

03/29/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY, DIRECTOR  
Name CARTER, JAMES W  
Address 1300 15TH AVENUE NW  
City-State-Zip: CAIRO GA 39828

Title PD  
Name WADAS, RICHARD  
Address 158 WINDGATE DRIVE  
City-State-Zip: CHESTER SPRINGS PA 19425

Title TD  
Name WITZEL, KURT  
Address 3116 SOUTHRIDGE PARK LANE  
City-State-Zip: ST. LOUIS MO 63129

Title VPD  
Name VINSON, MICHAEL  
Address 1359 ISLAND TOWN DRIVE  
City-State-Zip: MEMPHIS TN 38103

Title DIRECTOR  
Name MCMULLEN, VICKI  
Address 2395 ROCK ROAD  
City-State-Zip: ASHLAND OH 44805

*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:** RICHARD WADAS

PRESIDENT

03/29/2016

Electronic Signature of Signing Officer/Director Detail

Date