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: ARLENE HEINZMANN

Electronic Signature of Signing Officer/Director Detail

Offi

City-State-Zip: HALLANDALE FL 33009

SIGNATURE:

icer/Director Detail :			
9	PD	Title	TRES
ne	HEINZMANN, ARLENE	Name	DENNIS, CAROL
lress	450 GOLDEN ISLES DRIVE # 3D	Address	450 GOLDEN ISLES DR # 2B
-State-Zip:	HALLANDALE FL 33009	City-State-Zip:	HALLANDALE FL 33009
9	SD		
ne	GUIDICE, TONY		
Iress	450 GOLDEN ISLES DR #1C		

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.

Entity Name: CRYSTAL COVE, INC., A CONDOMINIUM

Current Principal Place of Business:

450 GOLDEN ISLES DRIVE HALLANDALE, FL 33009

DOCUMENT# N06999

Current Mailing Address:

450 GOLDEN ISLES DRIVE HALLANDALE. FL 33009

FEI Number: 59-1110577

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

GLAZE AND ASSOCIATES, P.A. 1920 E. HALLANDALE BEACH BLVD. HALLANDALE, FL 33009 US

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Certificate of Status Desired: No

PRESIDENT

04/27/2013

Date

FILED Apr 27, 2013 Secretary of State CC6399601118

Date