

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000000143

**Entity Name:** CROWN POINTE OF CLERMONT HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**May 07, 2017**  
**Secretary of State**  
**CC7112465648**

**Current Principal Place of Business:**

12549 CROWN POINTE CIRCLE  
CLERMONT, FL 34711

**Current Mailing Address:**

P.O. BOX 120124  
CLERMONT, FL 34711

**FEI Number: 59-3501111**

**Certificate of Status Desired: No**

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

KING, SHIRLEY  
12549 CROWN POINT CIRCLE  
CLERMONT, FL 34711 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: SHIRLEY KING**

**05/07/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name COUTURE, ERIC  
Address 12627 CROWN POINTE CIRCLE  
City-State-Zip: CLERMONT FL 34711

Title VP  
Name SMY, KELLY  
Address 12519 CROWN POINTE CIRCLE  
City-State-Zip: CLERMONT FL 34711

Title T  
Name KING, SHIRLEY  
Address 12549 CROWN POINT CIRCLE  
City-State-Zip: CLERMONT FL 34711

*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: SHIRLEY KING**

**SECRETARY /  
TREASURER**

**05/07/2017**

Electronic Signature of Signing Officer/Director Detail

Date