2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2012
Secretary of State

DOCUMENT# 725079

Entity Name: CARROLLWOOD VILLAGE CYPRESS CLUSTER HOUSES CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

14101 CYPRESS CIRCLE
TAMPA, FL 33618 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 271178
TAMPA, FL 33688 US

New Mailing Address:

FEI Number: 59-1456772 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURTON, KENNETH
14101 CYPRESS CIRCLE
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: BURTON, KENNETH
Address: 14101 CYPRESS CIRCLE
City-St-Zip: TAMPA, FL 33618

Title: D
Name: SEIBERT, MARGARET
Address: 14211 CYPRESS TERR
City-St-Zip: TAMPA, FL 33618

Title: SD
Name: MARTEL, CHRISTINE
Address: 13508 SOBRADO DRIVE
City-St-Zip: TAMPA, FL 33624

Title: TD
Name: HAMEROFF, ALVIN
Address: 14223 CYRPESS CIR
City-St-Zip: TAMPA, FL 33618

Title: VP D
Name: MARTEL, CHRISTINE
Address: 13508 SOBRADO DRIVE
City-St-Zip: TAMPA, FL 33624

Title: D
Name: HARABURD, HERBERT
Address: 14203 CYPRESS CIR
City-St-Zip: TAMPA, FL 33618

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: AL HAMEROFF TREA 03/02/2012

Electronic Signature of Signing Officer or Director Date