## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Aug 17, 2001 8:00 am § Secretary of State DOCUMENT # 750236 1. Entity Name 08-17-2001 90005 026 \*\*\*\*61.25 CYPRESS BEND HOMEOWNERS ASSOCIATION OF COUNTRYSI Principal Place of Business Mailing Address 2585 WINDING WOOD DR A0081875 2585 WINDINGS WOOD DR CLEARWATER FL 33761 CLEARWATER FL 33761 2. Principal Place of Business 3. Mailing Address 2501 Dogwood Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Cheruat <u> 420</u> City & State City & State 4. FEI Number Applied For 59-2455796 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired 33761 us A 3761 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent B. Sovecast Street Address (P.O. Box Number is Not Acceptable) LEWIS, BARBARA 2585 WINDING WOOD DR CLEARWATER FL 33761 Zip Code 3376 City 8. 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. FILE NOW: 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. velete TITLE **VP** TITLE Change ☐ Addition CR2E037 (10/00 NAME NAME POTTS, LYNDA 2607 Windry Wood. Ar. STREET ADDRESS STREET ADDRESS 2503 CYPRESS BEND DR CITY-ST-ZIP CITY-ST-ZIP FL. 33761 <u>Clearwater FL 33761</u> TITLE Delete TITI F Change ☐ Addition Blien Sollivan NAME NAME WAYNE, DECKERT 2781 Cotton wood Court STREET ADDRESS STREET ADDRESS 2510 BRIARWOOD COURT CITY-ST-ZIP CITY-ST-ZIP -CLEARWATER FL 33761 Leonate (5) - 3776/ TITLE Delete TITLE Change ☐ Addition Lynda Potts NAME SAMPSON, SCOTT NAME 2503 Cypress Bend Dr. B STREET ADDRESS 2607 WINDING WOOD DR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP KL-من المعاملة CLEARWATER FL 33761 TITLE ☐ Delete TITLE Addition ☐ Change Pirch NAME SULLIVAN, MARY ELLEN-NAME Rick Tennont STREET ADDRESS 2781 COTTONWOOD CT STREET ADDRESS 2449 Windry Wood Drive CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33761 Delete TITLE TITLE Change ☐ Addition NAME PICKLES, NORMAN NAME STREET ADDRESS STREET ADDRESS 2691 CYPRESS BEND CITY-ST-ZIF CITY-ST-ZIP **CLEARWATER FL 33761** TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME OPIE, MICHELLE NAME STREET ADDRESS STREET ADDRESS 2507 DOGWOOD CT CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33761

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE!

**FILED**