

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 755145

FILED
Dec 01, 2014
Secretary of State

Entity Name: CYPRESSWOOD PLANTATION HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2925 PLANTATION RD.
WINTER HAVEN, FL 33884 US

New Principal Place of Business:

8390 CHAMPIONSGATE BLVD.
304
CHAMPIONSGATE, FL 33896 US

Current Mailing Address:

P.O. BOX 1098
DUNDEE, FL 338381098

New Mailing Address:

8390 CHAMPIONSGATE BLVD.
304
CHAMPIONSGATE, FL 33896

FEI Number: 59-2790503

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESROCHERS, CHRISTOPHER A
2504 AVE G NW
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

AEGIS COMMUNITY MANAGEMENT SOLUTIONS INC.
8390 CHAMPIONSGATE BLVD.
304
CHAMPIONSGATE, FL 33896 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: DAVID L. BURMAN

12/01/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: THRASHER, CONNELL
Address: 8390 CHAMPIONSGATE BLVD. 304
City-St-Zip: CHAMPIONSGATE, FL 33896

Title: VP
Name: FUTCH, STEPHEN
Address: 8390 CHAMPIONSGATE BLVD. 304
City-St-Zip: CHAMPIONSGATE, FL 33896

Title: SEC
Name: SEALY, ERIC
Address: 8390 CHAMPIONSGATE BLVD.304
City-St-Zip: CHAMPIONSGATE, FL 33896

Title: TRE
Name: DAVIS, PHILIP C JR
Address: 8390 CHAMPIONSGATE BLVD. 304
City-St-Zip: CHAMPIONSGATE, FL 33896

Title: D
Name: MUTO, RICHARD SR
Address: 8390 CHAMPIONSGATE BLVD. 304
City-St-Zip: CHAMPIONSGATE, FL 33896

Title: D
Name: HISEY, CAROL
Address: 8390 CHAMPIONSGATE BLVD.304
City-St-Zip: CHAMPIONSGATE, FL 33896

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: DAVID L. BURMAN

DIR

12/01/2014

Electronic Signature of Signing Officer or Director

Date