

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90209 048 ****61.25

DOCUMENT # 756521

1. Entity Name
CYPRESS CREEK VILLAS OF CORAL SPRINGS III
CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
TRANSCONTINENTAL PROPERTY
1323 LYONS ROAD
COCONUT CREEK, FL 33063 US

Mailing Address
TRANSCONTINENTAL PROPERTY
1323 LYONS ROAD
COCONUT CREEK, FL 33063 US

DO NOT WRITE IN THIS SPACE



04232007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-2162451

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARTIN, ROBERT C ESQ
319 SE 14TH STREET
FT LAUDERDALE, FL 33316

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME GONZALES, ALEX
STREET ADDRESS 100852 ROYAL PALM BOULEVARD
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE D
NAME MOHIE, SHAMSADDIN
STREET ADDRESS 10874 ROYAL PALM BOULEVARD
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE SD
NAME MORA, FRANK
STREET ADDRESS 10916 ROYAL PALM BOULEVARD
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Alex Gonzales
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/23/07
Date

Daytime Phone #