

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 22, 2008
Secretary of State

DOCUMENT# 756521

Entity Name: CYPRESS CREEK VILLAS OF CORAL SPRINGS III CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**7401 WILES RD.
SUITE 104
CORAL SPRINGS, FL 33067 US**New Principal Place of Business:****Current Mailing Address:**7401 WILES RD.
SUITE 104
CORAL SPRINGS, FL 33067 US**New Mailing Address:****FEI Number:** 59-2162451**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**M&M PROPERTY MANAGEMENT, LLC
7401 WILES RD
SUITE 104
CORAL SPRINGS, FL 33067 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 () Delete
Name: GONZALEZ, ALEX
Address: 7401 WILES ROAD #104
City-St-Zip: CORAL SPRINGS, FL 33067**Title:** TD () Delete
Name: MOHIE, SHAMSADDIN
Address: 7401 WILES ROAD #104
City-St-Zip: CORAL SPRINGS, FL 33067**Title:** SD () Delete
Name: MORA, FRANK
Address: 7401 WILES ROAD #104
City-St-Zip: CORAL SPRINGS, FL 33067**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: WHITE, DAVID
Address: 7401 WILES ROAD #104
City-St-Zip: CORAL SPRINGS, FL 33067**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT MILLER

RA

12/22/2008

Electronic Signature of Signing Officer or Director

Date