## 4-29-97 13-5694 FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

768376

(6)

DOCUMENT # 768376 (6)  1. Corporation Name  CYPRESSWOOD GOLF VILLAS HOMEOWNERS' ASSOCIATION, INC.							
Principal Place of Business Mailing Address						I BUSA DYDAN QUBAN QUBIN ÆND	## B#B## <b>###</b> ##
P O BOX 1796 DUNDEE FL 33838 US		P O BOX 1796 DUNDEE FL 33838-1796 US					
					3. Date Incorporated or Qualified 05/11/1983	3a. Date of Las 04/22/	t Report <b>1996</b>
2. Principal P	Principal Place of Business 2a. Mailing Address 26			4. FEI Number <b>59-29535</b> 6		Applied For Not Applicable	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.				5 Certificate of Status Desired \$8.75 Additiona		
22						Fee	Required
City & State City & State					6. Election Campaign Financing Trust Fund Contribution		May Be ed to Fees
Zip			Country		8. This corporation has liability for		
24			30		Florida Statutes Yes No		
	9. Name and Address of Current	Registered Agent	8	1 Name	10. Name and Address of New Ro	egistøred Agent	
EIEI DO	EDANICE C		Ľ				
FIELDS, FRANCES S 2257 FIRESTONE PLACE, SE			8	2 Street	Address (P.O. Box Number is Not Accepta	ble)	
WINTER HAVEN FL 33884				3			<del></del>
*******	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		8	4 City		ne   7	ip Code
				′		FL   T	,
11. Pursuant office or agent. La	to the provisions of Sections 617.0502 registered agent, or both, in the State of im familiar with, and accept the obliga	and 617,1508, Florida Stati of Florida. Such change was tions of, Section 617,0503, F	utes, the abo s authorized l Florida Statut	ive-named by the corp es.	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing pt the appointment	g its registered as registered
	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agen				required when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS  DELETE		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT	
NAME	STANGE, WAYNE		1.2 NAM		D GORDON W. PRATT	Onling	K K MONITON
STREET ADDRESS	AAAA MINIOCOOT OOLIDT		I '		2835 WINGFOOT COUR	የጥ	
CITY-ST-ZIP	WINTER HAVEN FL				WINTER HAVEN FL 33		
TITLE	D	☐ DELETE	2.1 TITLE			☐ Chang	e 🔲 Addition
NAME	HARMS, GERALD		2.2 NAME				
STREET ADDRESS	2803 WINGFOOT COURT WINTER HAVEN FL		2.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	P DELETE		2. 4 CITY 3.1 TITLE	'-S1-ZIP		Chang	e Addition
NAME	WILSON, CHARLES	3.21				La onung	
STREET ADDRESS	2212 SAWGRASS COURT		1	ET ADDRESS			
CITY-ST-ZIP	WINTER HAVEN FL		3.4 C(T)				
TITLE	D	X DELETE	4.1 TO LE		D	☐ Chang	e 🗶 Addition
NAME	FOLEY, ELIZABETH		4. 2 NAM		ROBERT D. FOX		
STREET ADDRESS	2255 FIRESTONE PLACE			ET ADDRESS	2244 FIRESTONE PLA	ACE	
CITY-ST-ZIP	WINTERHAVEN FL			- ST - ZIP	WINTER HAVEN FL 33	8884	e Addition
TITLE	D Fletcher, Donald	☐ DETEIE	5.1 TITLE			L Chang	e L Addition
NAME STREET ADDRESS	2214 SAWGRASS COURT		5.2 NAM 5.3 SIRE	et address			
CITY-ST-ZIP	WINTERHAVEN FL		5.4 CITY				
TITLE			6.1 TITLE			Chang	e Addition
NAME	JULIE PHILLIPS		6.2 NAM	E	1		
STREET ADDRESS	2284 FIRESTONE PLACE		63 S1HE	ET ADDRESS			
	WANTED HAVEN EI						

14. I do 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 annual 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 12 or Block 13 if chapted, or on an attachment with an address.

**FILED** 

Apr 29 1997 8:00am

Secretary of State