

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 01, 2005 8:00 am
Secretary of State

03-02-2005 90083 035 ****61.25

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1st MOORE CR2E037 (10/04)

DOCUMENT # N01000000778 1. Entity Name CYPRESS LAKES MANOR SOUTH CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 8771 ROSE CT FT MYERS FL 33919		Mailing Address 8771 ROSE CT FT MYERS FL 33919			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-1082059	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SHIELDS, CHRISTOPHER J 1833 HENDRY ST FT MYERS FL 33901				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW: FEE IS \$61.25 Due By: May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	8- CARRY, HOWARD 6741 PANTHER LANE FT MYERS FL 33919	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Beverly Dirce FT. Myers, FL 33919		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KOHLI, KUMAR 8791 32 ROSECOURT FT MYERS FL 33919	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bonnie Murrio 6741 Panther Lane Ft. Myers,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWENSON, DORIS 6741 PANTHER LANE FT MYERS FL 33919	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Jane Glave 8730 Rose Court		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARSHALL, PATTI 6700 WINKLER RD FT MYERS FL 33919	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Larry Kephia 6741 Panther Lane M2 Ft. Myers, FL 33919		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HART, BILL 8790 U4 ROSE COURT FT MYERS FL 33919	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Joe Valente 8730 Rose Court Ft. Myers, FL 33919		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARRY, JEAN 6741 PANTER LANE FT MYERS FL 33919	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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: <u>Jean Garry</u> <u>Jean. Garry</u> <u>3-25-05</u> <u>239-481-8318</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					