

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008603

FILED  
Apr 13, 2007  
Secretary of State

**Entity Name:** CYPRESS POINTE AT CYPRESS SPRINGS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1350 ORANGE AVE, SUITE 100  
WINTER PARK, FL 32789 US

**New Principal Place of Business:**

**Current Mailing Address:**

1350 ORANGE AVE, SUITE 100  
WINTER PARK, FL 32789 US

**New Mailing Address:**

**FEI Number:** 65-0326491

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PHILLIPS, ROGER  
ATTWOOD-PHILLIPS, INC  
1350 ORANGE AVE, SUITE 100  
WINTER PARK, FL 32789 US

**Name and Address of New Registered Agent:**

GODBOLD, DOWNING, SHEAHAN & BILL PA  
222 WEST COMSTOCK AVE  
STE 101  
WINTER PARK, FL 32789 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: JOHN BILL

04/13/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BOTWINIK, NIKKI  
Address: 1357 AMARYLLIS CIR  
City-St-Zip: ORLANDO, FL 32825 US

Title: TD ( ) Delete  
Name: EVANS, ISAI AH JR  
Address: 1443 AMARYLLIS CIR  
City-St-Zip: ORLANDO, FL 32825

Title: VD ( ) Delete  
Name: THOMAS, DON  
Address: 1437 AMARYLLIS CIR  
City-St-Zip: ORLANDO, FL 32825

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD ( ) Change (X) Addition  
Name: MOSER, GEORGE  
Address: 12032 BLAIREMONT WAY  
City-St-Zip: ORLANDO, FL 32825 US

Title: D ( ) Change (X) Addition  
Name: LITTLE, WARDRIAS  
Address: 1917 AMARYLLIS CIR  
City-St-Zip: ORLANDO, FL 32825 US

I hereby certify that the information supplied with this filing does not qualify for the 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: NIKKI BOTWINIK

PD

04/13/2007

Electronic Signature of Signing Officer or Director

Date