

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003487

FILED  
Apr 11, 2008  
Secretary of State

Entity Name: CYPRESS BEND NEIGHBORHOOD ASSOCIATION, INC.

## Current Principal Place of Business:

2180 W. SR 434  
SUITE 5000  
LONGWOOD, FL 327795044

## New Principal Place of Business:

## Current Mailing Address:

2180 W. SR 434  
SUITE 5000  
LONGWOOD, FL 327795044

## New Mailing Address:

FEI Number: 57-1163389

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HART, JAMES W  
% SENTRY MANAGEMENT INC.  
2180 W. SR 434, STE 5000  
LONGWOOD, FL 327795044 US

## Name and Address of New Registered Agent:

HART, JAMES W JR  
SENTRY MANAGEMENT INC.  
2180 W. SR 434, STE 5000  
LONGWOOD, FL 327795044 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: JAMES W HART JR

04/11/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: COOPERMAN, WADE  
Address: 9960 CYPRESS KNEE CIR  
City-St-Zip: ORLANDO, FL 32825

Title: SD ( ) Delete  
Name: MORRIS, CATHERINE  
Address: 9925 CYPRESS KNEE CIR  
City-St-Zip: ORLANDO, FL 32825

Title: TD ( ) Delete  
Name: MICARE, DENNIS  
Address: 10287 CYPRESS KNEE CIR  
City-St-Zip: ORLANDO, FL 32825

Title: D ( ) Delete  
Name: GALINDO, ANIBAL  
Address: 10209 CYPRESS KNEE CIR  
City-St-Zip: ORLANDO, FL 32825

Title: VPD ( ) Delete  
Name: LOFTON, CHRIS  
Address: 2719 CURPIN LN  
City-St-Zip: ORLANDO, FL 32825

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WENDELL, RICHARD  
Address: 9961 CYPRESS KNEE CIR  
City-St-Zip: ORLANDO, FL 32825

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: ( ) 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: RICHARD WENDELL

PD

04/11/2008

Electronic Signature of Signing Officer or Director

Date