

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007155

FILED  
May 03, 2007  
Secretary of State

Entity Name: CYPRESS PRESERVE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1105 KESINGTON PARK DRIVE  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

1105 KESINGTON PARK DRIVE  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

FEI Number: 20-5413315      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BECKETT, WILLIAM A ESQUIRE  
215 NORTH EOLA DRIVE  
ORLANDO, FL 32801 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: GREGG, CHARLES W  
Address: 1105 KESINGTON PARK DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VPD ( ) Delete  
Name: CONLEY, HAMPTON P  
Address: 1105 KESINGTON PARK DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: STD ( ) Delete  
Name: SNYDER, SIMON D  
Address: 1105 KESINGTON PARK DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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

Title: PD (X) Change ( ) Addition  
Name: FRITZ, MICHAEL  
Address: 1105 KESINGTON PARK DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VPD (X) Change ( ) Addition  
Name: ROWLETTE, ROBERT A JR  
Address: 1105 KESINGTON PARK DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: STD (X) Change ( ) Addition  
Name: ALVERSON, TAMMY  
Address: 1105 KESINGTON PARK DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: MICHAEL FRITZ

P

05/03/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date