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FILED
Feb 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N10136 (2)**
1. Corporation Name
CYPRESS BEND CONDOMINIUM V ASSOCIATION, INC.



Principal Place of Business 3500 GATEWAY DRIVE #202 POMPANO BEACH FL 33069 US	Mailing Address 3500 GATEWAY DRIVE #202 POMPANO BEACH FL 33069 US
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3. Date Incorporated or Qualified 07/09/1985	
4. FEI Number 59-2552569	Applied For ☐ Not Applicable ☐

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent LEVIN -LEVINE, CHERYL E 10226 NW 47 STREETO SUNRISE FL 33351
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	MARZAK, FRED
STREET ADDRESS	2220 CYPRESS BEND DR., #110
CITY-ST-ZIP	POMPANO BEACH FL
TITLE	VSD
NAME	PEREZ, DINORAH
STREET ADDRESS	2222 CYPRESS BEND DR., #404
CITY-ST-ZIP	POMPANO BEACH FL
TITLE	SVD
NAME	WILKINSON, CATHY
STREET ADDRESS	2222 CYPRESS BEND DR. N. #308
CITY-ST-ZIP	POMPANO BEACH FL
TITLE	TD
NAME	BELISLE, RAYMOND
STREET ADDRESS	2224 CYPRESS BEND DR. N. #302
CITY-ST-ZIP	POMPANO BEACH FL
TITLE	D
NAME	POMARANTZ, NORMAN
STREET ADDRESS	2220 CYPRESS BEND DR., #305
CITY-ST-ZIP	POMPANO BEACH FL
TITLE	D
NAME	ARCCHAMBAULT, GILLES
STREET ADDRESS	2220 CYPRESS BEND DR., #501
CITY-ST-ZIP	POMPANO BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PRESIDENT
1.2 NAME	JAMES KING
1.3 STREET ADDRESS	2222 CYPRESS BEND DR. #410
1.4 CITY-ST-ZIP	POMPANO BEACH FL 33069
2.1 TITLE	VICE PRESIDENT
2.2 NAME	DENNIS DOYON
2.3 STREET ADDRESS	2222 CYPRESS BEND DR. #110
2.4 CITY-ST-ZIP	POMPANO BEACH FL 33069
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental 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 changed, or on an attachment with an address.

SIGNATURE: James E King JAMES E KING 2/16/98 954 972 7081

CR2E037 (10/97)