

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N15628

FILED  
Apr 30, 2003  
Secretary of State

**Entity Name:** THE VILLAGES AT CYPRESS CREEK MASTER PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

115 S. DALE MABRY HWY  
SUITE 300  
TAMPA, FL 33609 US

**New Principal Place of Business:**

1207 N. HIMES AVE.  
SUITE 3  
TAMPA, FL 33607 US

**Current Mailing Address:**

115 S. DALE MABRY HWY  
SUITE 300  
TAMPA, FL 33609 US

**New Mailing Address:**

1207 N. HIMES AVE.  
SUITE 3  
TAMPA, FL 33607 US

FEI Number: 59-2805992

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNIQUE PROPERTY SERVICES INC  
115 S. DALE MABRY HWY  
SUITE 300  
TAMPA, FL 33609 US

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

UNIQUE PROPERTY SERVICES INC  
1207 N. HIMES AVE.  
SUITE 3  
TAMPA, FL 33607 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: DAVID G. KRUG, UNIQUE PROPERTY SERVICES IN

04/30/2003

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MILLER, MICHAEL  
Address: 3634 GAVIOTA DRIVE  
City-St-Zip: RUSKIN, FL

Title: VPD ( ) Delete  
Name: HEREFORD, FRANCISE  
Address: 3623 GAVIOTA DR.  
City-St-Zip: RUSKIN, FL 33573 US

Title: D ( ) Delete  
Name: LEWIS, MARCY  
Address: 11111 BISCAYNE BLVD PENTHOUSE 52  
City-St-Zip: MIAMI, FL

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

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

Title: VPD (X) Change ( ) Addition  
Name: HEREFORD, FRANCES  
Address: 3623 GAVIOTA DR.  
City-St-Zip: RUSKIN, FL 33573 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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 MILLER

PD

04/30/2003

Electronic Signature of Signing Officer or Director

Date