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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N17764

1. Corporation Name
CYPRESS POND HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

3102 CYPRESS WOOD BLVD
WINTER HAVEN FL 33884
US

Mailing Address

C/O GENEVIEVE O'HARA
3007 SILVERADO TERRACE
WINTER HAVEN FL 33884



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

3. Date Incorporated or Qualified

11/13/1986

4. FEI Number
59-2953541

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

MORRIS, ROBERT D
3102 CYPRESSWOOD BLVD
WINTER HAVEN FL 33884

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 *Robert D Morris Treasurer*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-12-99

DATE

12. OFFICERS AND DIRECTORS

TITLE P DELETE
NAME KING, IVAN
STREET ADDRESS 3015 SILVERADO TERR
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE S DELETE
NAME MOSIMANN, JOAN
STREET ADDRESS 3009 SILVERADO TERRACE
CITY-ST-ZIP WINTER HAVEN FL

TITLE T DELETE
NAME MORRIS, ROBERT D
STREET ADDRESS 3102 CYPRESSWOOD BLVD
CITY-ST-ZIP WINTER HAVEN FL

TITLE D DELETE
NAME PLETCHER, MARILYN
STREET ADDRESS 3011 SILVERADO TERR
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE D DELETE
NAME DANGREMOND, ROGER
STREET ADDRESS 3025 SILVERADO TERR
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE D DELETE
NAME MOSIMANN, HARRY
STREET ADDRESS 3009 SILVERADO TERR
CITY-ST-ZIP WINTER HAVEN FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
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, with all other like empowered.

SIGNATURE:

Robert D Morris Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-99 9413244144
Date Daytime Phone #

CR2E037 (1/98)