

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90007 005 ****61.25

DOCUMENT # N37046

1. Entity Name

CYPRESS POINT HOMEOWNER'S ASSOCIATION OF ORANGE

Principal Place of Business

Mailing Address

8867 LAKE SHEEN COURT
 ORLANDO FL 32836
 US

8867 LAKE SHEEN COURT
 ORLANDO FL 32836
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2999300

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KEHLER, PAT
407 WEKIA SPRINGS ROAD
STE 205
LONGWOOD FL 32779

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	SCHWARTSBURG, THOMAS J	
STREET ADDRESS	9142 GREENT HERON CIRCLE	
CITY-ST-ZIP	ORLANDO FL 32826	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	MCCONNELL, JOHN	
STREET ADDRESS	9077 GREAT HERON CIRCLE	
CITY-ST-ZIP	ORLANDO FL 32836	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	WEPELMANN, LORRIS	
STREET ADDRESS	9128 POINT CYPRESS DR.	
CITY-ST-ZIP	ORLANDO FL 32826	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	SHAW, WAREEN	
STREET ADDRESS	8817 LAKE SHEEN CT	
CITY-ST-ZIP	ORLANDO FL 32826	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CORKERELL, PRISCILLA	
STREET ADDRESS	9163 GREAT HERON CIRCLE	
CITY-ST-ZIP	ORLANDO FL 32826	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	RANDELL, ROBERT	
STREET ADDRESS	9146 GREAT HERON CIRCLE	
CITY-ST-ZIP	ORLANDO FL 32826	

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WEPELMANN, LORRIS	
STREET ADDRESS	9128 POINT CYPRESS DR	
CITY-ST-ZIP	ORLANDO, FL 32826	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	COCKERELL, PRISCILLA	
STREET ADDRESS	9163 GREAT HERON CIRCLE	
CITY-ST-ZIP	ORLANDO, FL 32826	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCCONNELL, JOHN	
STREET ADDRESS	9077 GREAT HERON CIRCLE	
CITY-ST-ZIP	ORLANDO, FL 32836	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BEN NEWLIN	
STREET ADDRESS	8749 WHITE ISLES CT.	
CITY-ST-ZIP	ORLANDO, FL 32826	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BILL SCHNEPP	
STREET ADDRESS	9147 GREAT HERON CIRCLE	
CITY-ST-ZIP	ORLANDO, FL 32836	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BLAINE SWEATT	
STREET ADDRESS	9140 POINT CYPRESS DR.	
CITY-ST-ZIP	ORLANDO, FL 32836	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Signature of Lorriss Weppelmann 3/22/2001 4078762081



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)