

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90177 016 ****61.25

DOCUMENT # N39059

1. Entity Name

CYPRESS WOODS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

~~GREENLITE PROPERTY MGMT~~
~~141 NW 20TH ST STE F-2~~
~~LAKE WORTH FL 33431~~

~~GREENLITE PROPERTY MGMT~~
~~141 NW 20TH ST STE F-2~~
~~LAKE WORTH FL 33431~~
 US

2. Principal Place of Business

3. Mailing Address

Associated Property Mgmt

Associated Property Mgmt

Suite, Apt. #, etc.

Suite, Apt. #, etc.

400 S. Dixie Hwy Ste 10

400 S. Dixie Hwy Ste 10

City & State

City & State

Lake Worth, FL

Lake Worth, FL

Zip

Country

Zip

Country

33460

PB

33460

PB

4. FEI Number

65-0299532

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

~~BELLOFATTO, JOHN M~~
~~141 NW 20TH ST~~
~~SUITE F-2~~
~~BGGA RATON FL 33431~~

Name **ASSOCIATED PROPERTY MANAGEMENT**

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

400 SO. DIXIE HWY. #10

City **LAKE WORTH**

FL

Zip Code **33460**

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** Delete
 NAME **MORABITZ, MICHAEL**
 STREET ADDRESS **8541 CYPRESS SPRINGS RD**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE **TPD** Change Addition
 NAME **Doughty, Thomas**
 STREET ADDRESS **3695 Royal Cypress Lane**
 CITY-ST-ZIP **Lake Worth, FL 33467**

TITLE **VPD** Delete
 NAME **ERVAY, DONALD G**
 STREET ADDRESS **3872 CYPRESS LAKE DR**
 CITY-ST-ZIP **LAKE WORTH FL 33487**

TITLE **VP** Change Addition
 NAME **Vitani, Toni**
 STREET ADDRESS **3696 cypress Drive**
 CITY-ST-ZIP **LAKE WORTH, FL 33467**

TITLE **SD** Delete
 NAME **REIMAN, PHYLLIS**
 STREET ADDRESS **3772 CYPRESS LAKE DR**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE **D** Change Addition
 NAME **DONALDON, DERWENT**
 STREET ADDRESS **3900 CYPRESS LAKE DRIVE**
 CITY-ST-ZIP **LAKE WORTH, FL 33467**

TITLE **T** Delete
 NAME **SEVEDIO, DOMINIC**
 STREET ADDRESS **3792 CYPRESS LAKE DR**
 CITY-ST-ZIP **LAKE WORTH FL 33467**

TITLE **D** Change Addition
 NAME **HAMMOND, SCOTT**
 STREET ADDRESS **8634 VISTA GREENS CT.**
 CITY-ST-ZIP **LAKE WORTH, FL 33467**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: **Thomas Doughty, Toni A DOUGHTY** 3/24/02 561-434-9785

CR2E037 (9/01)