


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 25, 2004 8:00 am
Secretary of State

03-25-2004 90025 020 ****61.25

DOCUMENT # N39059
 1. Entity Name
CYPRESS WOODS ASSOCIATION, INC.



Principal Place of Business Mailing Address
ASSOCIATED PROPERTY MGMT **ASSOCIATED PROPERTY MGMT**
1928 LAKE WORTH RD. **1928 LAKE WORTH RD.**
LAKE WORTH FL 33461 **LAKE WORTH FL 33461**
US **US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



MOORE CR2E037 (11/03)

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
ASSOCIATED PROPERTY MANAGEMENT
1928 LAKE WORTH RD.
LAKE WORTH FL 33461

7. Name and Address of New Registered Agent
 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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE RD	<input checked="" type="checkbox"/> Delete
NAME YOUNG, FRANK	
STREET ADDRESS 3812 CYPRESS LAKE DRIVE	
CITY-ST-ZIP LAKE WORTH FL 33467	
TITLE VD	<input checked="" type="checkbox"/> Delete
NAME PATTON, JOHN	
STREET ADDRESS 3811 CYPRESS LAKE DRIVE	
CITY-ST-ZIP LAKE WORTH FL 33467	
TITLE SD	<input type="checkbox"/> Delete
NAME REIMAN, PHYLLIS	
STREET ADDRESS 3772 CYPRESS LAKE DR	
CITY-ST-ZIP LAKE WORTH FL 33467	
TITLE D	<input checked="" type="checkbox"/> Delete
NAME DONALDON, DERWENT	
STREET ADDRESS 3900 CYPRESS LAKE DRIVE	
CITY-ST-ZIP LAKE WORTH FL 33467	
TITLE D	<input type="checkbox"/> Delete
NAME HAMMOND, SCOTT	
STREET ADDRESS 8634 VISTA GREENS CT.	
CITY-ST-ZIP LAKE WORTH FL 33467	
TITLE TD	<input checked="" type="checkbox"/> Delete
NAME TUDISCO, DOROTHY	
STREET ADDRESS 3808 CYPRESS LAKE DRIVE	
CITY-ST-ZIP LAKE WORTH FL 33467	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TUDISCO, DOROTHY	
STREET ADDRESS 3808 CYPRESS LAKE DR.	
CITY-ST-ZIP LAKE WORTH FL 33467	
TITLE VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HAMMOND, SCOTT	
STREET ADDRESS 8634 VISTA GREENS CT.	
CITY-ST-ZIP LAKE WORTH, FL 33467	
TITLE TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME DOUGLAS, THOMAS	
STREET ADDRESS 3695 Royal Cypress Ln.	
CITY-ST-ZIP LAKE WORTH, FL 33467	
TITLE TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME JOHNSON, PATRICIA	
STREET ADDRESS 3726 Royal Cypress Ln.	
CITY-ST-ZIP LAKE WORTH, FL 33467	
TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME Bischer, Sue	
STREET ADDRESS 3688 CYPRESS LAKE DR.	
CITY-ST-ZIP LAKE WORTH FL 33467	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Dorothy A. Judson, Pres.* Date: *3/17/04* Daytime Phone #: *561-649-3409*