

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90121 003 ****61.25

DOCUMENT # N39059

1. Entity Name

CYPRESS WOODS ASSOCIATION, INC.



Principal Place of Business

**ASSOCIATED PROPERTY MGMT
400 S. DRIVE HWY STE10
LAKE WORTH FL 33460
US**

Mailing Address

**ASSOCIATED PROPERTY MGMT
400 S. DRIVE HWY STE10
LAKE WORTH FL 33460
US**

11011298



2. Principal Place of Business

Associated Property Mgmt

1928 LAKE WORTH RD

LAKE WORTH, FL

33461 USA

3. Mailing Address

Associated Property Mgmt

1928 LAKE WORTH RD.

LAKE WORTH, FL

33461 USA

CHECK HERE IF MAKING CHANGES

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
400 SO. DIXIE HWY. #10
LAKE WORTH FL 33460**

7. Name and Address of New Registered Agent

Name **ASSOCIATED PROPERTY MANAGEMENT**
Street Address (P.O. Box Number is Not Acceptable)
1928 LAKE WORTH RD.
City **LAKE WORTH** FL Zip Code **33461**

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 reappointing)

DATE

Agent 4/16/03

FILE NOW: FEE IS \$61.25

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	TPD	<input checked="" type="checkbox"/> Delete
NAME	DOUGTY, THOMAS	
STREET ADDRESS	3695 ROYAL CYPRESS LANE	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	VITANI, TONI	
STREET ADDRESS	3696 CYPRESS 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 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		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	YOUNG, FRANK	
STREET ADDRESS	3812 CYPRESS LAKE DR.	
CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PATTON, JOHN	
STREET ADDRESS	3811 CYPRESS LAKE DR.	
CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TUDISCO, DOROTHY	
STREET ADDRESS	3808 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		
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:

SIGNATURE REQUIRED

Res 4-14-03

CR2E037 (10/02)