

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N95000005507

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: THE CYPRESS POINTE RESORT II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12016 TURTLE CAY CIRCLE
ORLANDO, FL 32836

New Principal Place of Business:

8651 TREASURE CAY LANE
ORLANDO, FL 32836

Current Mailing Address:

12179 S APOPKA VINELAND RD
ORLANDO, FL 32836

New Mailing Address:

P.O. BOX 540669
MERRITT ISLAND, FL 32954

FEI Number: 59-3377247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIROCCO, ANNA M.
1781 PARK CENTER DRIVE
ORLANDO, FL 32835 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RICE, DAVID
Address: 12179 S APOPKA VINELAND RD #607
City-St-Zip: ORLANDO, FL 32836

Title: STD () Delete
Name: JOHNSON, JOHN
Address: 12179 S APOPKA VINELAND RD #607
City-St-Zip: ORLANDO, FL 32836

Title: VD () Delete
Name: BALTHAZOR, JEANNE
Address: 1781 PARK CENTER DRIVE
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MUNIZ, JAMES
Address: 8651 TREASURE CAY LANE
City-St-Zip: ORLANDO, FL 32836

Title: STD (X) Change () Addition
Name: DEOWDHAT, SUE
Address: 8651 TREASURE CAY LANE
City-St-Zip: ORLANDO, FL 32836

Title: VD (X) Change () Addition
Name: TILTON, RHONDA
Address: 8651 TREASURE CAY LANE
City-St-Zip: ORLANDO, FL 32836

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES MUNIZ

PD

04/30/2002

Electronic Signature of Signing Officer or Director

Date