

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Nov 08, 2007  
Secretary of State**

DOCUMENT# N96000005697

Entity Name: CYPRESS POINTE NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**PHOENIX MANAGEMENT SERVICES  
4800 N. STATE RD-7 SUITE 105  
FORT LAUDERDALE, FL 33319 US**New Principal Place of Business:**PROGRESSIVE MANAGEMENT ASSOC., INC.  
5400 S. UNIVERSITY DRIVE, STE. 101  
DAVIE, FL 33328 US**Current Mailing Address:**PHOENIX MANAGEMENT SERVICES  
4800 N. STATE RD-7 SUITE 105  
FORT LAUDERDALE, FL 33319 US**New Mailing Address:**C/O PROGRESSIVE MANAGEMENT ASSOC., INC.  
5400 S. UNIVERSITY DRIVE, STE. 101  
DAVIE, FL 33328 US

FEI Number: 59-2031220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**HOWE, LORA ESQ.  
TUCKER & TIGHE, P.A.  
800 E. BROWARD BLVD., SUITE 700  
FT. LAUDERDALE, FL 33301 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: DURANT, MICHAEL  
Address: 1145 SAWGRASS CORP PKWY  
City-St-Zip: SUNRISE, FL 33323Title: VPD ( ) Delete  
Name: SACKETT, RICHARD M  
Address: 740 CYPRESS POINTE DR W  
City-St-Zip: PEMBROKE PINES, FL 33027Title: D ( ) Delete  
Name: FABRICIUS, VALENTINE  
Address: 620 CYPRESS POINTE DR. WEST  
City-St-Zip: PEMBROKE PINES, FL 33027Title: TD ( ) Delete  
Name: FERNANDEZ, JACKIE  
Address: 821 CYPRESS POINTE DR. WEST  
City-St-Zip: PEMBROKE PINES, FL 33027Title: D ( ) Delete  
Name: JOHNSON, SAM  
Address: 1145 SAWGRASS CORP PKWY  
City-St-Zip: SUNRISE, FL 33323Title: D ( ) Delete  
Name: CORR, ARTHUR  
Address: 601 CYPRESS POINTE DR. WEST  
City-St-Zip: HOLLYWOOD, FL 33027**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change ( ) Addition  
Name: DURANT, MICHAEL  
Address: 5400 S. UNIVERSITY DRIVE, STE. 101  
City-St-Zip: DAVIE, FL 33328Title: VPD (X) Change ( ) Addition  
Name: SACKETT, RICHARD M  
Address: 5400 S. UNIVERSITY DRIVE, STE. 101  
City-St-Zip: DAVIE, FL 33328Title: D (X) Change ( ) Addition  
Name: FABRICIUS, VALENTINE  
Address: 5400 S. UNIVERSITY DRIVE, STE. 101  
City-St-Zip: DAVIE, FL 33328Title: TD (X) Change ( ) Addition  
Name: FERNANDEZ, JACKIE  
Address: 5400 S. UNIVERSITY DRIVE, STE. 101  
City-St-Zip: DAVIE, FL 33328Title: D (X) Change ( ) Addition  
Name: JOHNSON, SAM  
Address: 5400 S. UNIVERSITY DRIVE, STE. 101  
City-St-Zip: DAVIE, FL 33328Title: D (X) Change ( ) Addition  
Name: CORR, ARTHUR  
Address: 5400 S. UNIVERSITY DRIVE, STE. 101  
City-St-Zip: DAVIE, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL DURANT

PD

11/08/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date