2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005796

FILED Apr 20, 2006 Secretary of State

Entity Name: CYPRESS LAKES BUSINESS PARK PROPERTY OWNERS ASSOCIATION II, INC. **Current Principal Place of Business: New Principal Place of Business:** 3870 TAMPA RD, STE E OLDSMAR, FL 34677 **Current Mailing Address: New Mailing Address:** 3870 TAMPA RD, STE E OLDSMAR, FL 34677 FEI Number: 59-3416552 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BLEAKLEY, DALE E 3870 TAMPA RD, STE E OLDSMAR, FL 34677 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Change () Addition () Delete BLEAKLEY, DALE E Name: Name: 3870 TAMPA RD, STE E Address: Address: City-St-Zip: OLDSMAR, FL 34677 City-St-Zip: Title: DST () Delete Title: () Change () Addition Name: BLEAKLEY, KENT A Name: Address: P O BOX 1781 N/A Address: City-St-Zip: WHITE SALMON, WA City-St-Zip: Title: () Delete Title: () Change () Addition BLEAKLEY, BARBARA Name: Name: Address: PO BOX 1781 Address: City-St-Zip: WHITE SALMON, WA City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DALE E. BLEAKLEY DP 04/20/2006