2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006812

FILED Feb 06, 2004 Secretary of State

Entity Name: CYPRESS SPRINGS II HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 882 JACKSON AVENUE WINTER PARK, FL 32789 US **Current Mailing Address: New Mailing Address:** 882 JACKSON AVENUE WINTER PARK, FL 32789 US FEI Number: 59-3548664 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: VANDER VLIET, AMANDA M DAVIS, MARC P 882 JACKSON ÁVENUE 882 JACKSON AVENUE WINTER PARK, FL 32789 US US WINTER PARK, FL 32789 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: MARC P. DAVIS 02/06/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition TRUSSELL, GUYELL CRAWFOR, TERRY Name: Name: 120 FAIRWAY WOODS BOULEVARD Address: 2400 CYPRESS TRACE CIRCLE Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32825 Title: () Delete Title: (X) Change () Addition HAWKS, CANDICE Name: RUBINI, STEVE Name: Address: 120 FAIRWAY WOODS BOULEVARD Address: 10020 VALLEY ROSE COURT City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32825 Title: STD () Delete Title: SD (X) Change () Addition ERSKINE, CINDY L SEITZ, DEBORAH Name: Name: 120 FAIRWAY WOODS BOULEVARD 2155 AUTUMN VIEW DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32824 City-St-Zip: ORLANDO, FL 32825 () Change (X) Addition Title: () Delete Title: D Name: Name: GU, MEIYING Address: Address: 1913 STONE CREST COURT City-St-Zip: City-St-Zip: ORLANDO, FL 32825 Title: () Delete Title: () Change (X) Addition FORSTER, ROBERT Name: Name: 10556 SUNRISE TERRACE Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32825

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: DEBORAH SEITZ SD 02/06/2004