

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 20, 2009  
Secretary of State**

DOCUMENT# N99000003089

Entity Name: CYPRESS SPRINGS VILLAGE S HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1750 W. BROADWAY ST.  
SUITE #220  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 620368  
OVIEDO, FL 32762

**New Mailing Address:**

FEI Number: 59-3681519

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVIS, KEVIN  
1750 W. BROADWAY ST.  
OVIEDO, FL 32765 US

**Name and Address of New Registered Agent:**

DAVIS, KEVIN  
1750 W. BROADWAY ST.  
SUITE 220  
OVIEDO, FL 32765 US

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:

01/20/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PEARCE, MARCY  
Address: 2221 CYPRESS TRACE CIR  
City-St-Zip: ORLANDO, FL 32825

Title: VPD ( ) Delete  
Name: CLIFFORD, JACK  
Address: 2265 CYPRESS TRACE CIR  
City-St-Zip: ORLANDO, FL 32825

Title: STD ( ) Delete  
Name: MARINI, KELLI  
Address: 2225 CYPRESS TRACE CIR  
City-St-Zip: ORLANDO, FL 32825

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: PEARCE, MARCY  
Address: 2221 CYPRESS TRACE CIR  
City-St-Zip: ORLANDO, FL 32825

Title: VP (X) Change ( ) Addition  
Name: KIDD, BRUCE  
Address: 2534 CYPRESS TRACE CIRCLE  
City-St-Zip: ORLANDO, FL 32825

Title: TS (X) Change ( ) Addition  
Name: QUINN, SCOTT  
Address: 2334 CYPRESS TRACE CIRCLE  
City-St-Zip: ORLANDO, FL 32825

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: MARCY PEARCE

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date