

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008603

FILED  
Feb 02, 2012  
Secretary of State

**Entity Name:** CYPRESS POINTE AT CYPRESS SPRINGS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

385 DOUGLAS AVENUE  
3000  
ALTAMONTE SPRINGS, FL 32714 US

**New Principal Place of Business:**

**Current Mailing Address:**

385 DOUGLAS AVENUE  
3000  
ALTAMONTE SPRINGS, FL 32714 US

**New Mailing Address:**

**FEI Number:** 65-0326491

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GODBOLD, DOWNING, SHEAHAN & BILL PA  
222 WEST COMSTOCK AVE  
STE 101  
WINTER PARK, FL 32789 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: VD  
Name: RAMSAY, KEVIN  
Address: 1473 AMARYLLIS CIR  
City-St-Zip: ORLANDO, FL 32825 US

Title: TD  
Name: EVANS, ISAIAH JR  
Address: 1443 AMARYLLIS CIR  
City-St-Zip: ORLANDO, FL 32825

Title: D  
Name: KINDER, JEFF  
Address: 1442 AMARYLLIS CIR  
City-St-Zip: ORLANDO, FL 32825

Title: PD  
Name: MOSER, GEORGE  
Address: 12032 BLAIREMONT WAY  
City-St-Zip: ORLANDO, FL 32825 US

Title: SD  
Name: MCQUEENEY, JAMES  
Address: 1551 AMARYLLIS CIR  
City-St-Zip: ORLANDO, FL 32825 US

I hereby 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 all other like empowered.

SIGNATURE: GEORGE MOSER

PRES

02/02/2012

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

\_\_\_\_\_  
Date