04-25-2003 90283 002 ****61.25

N00000007949

FILED

03 MAY -7 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

90106006

AMENDED

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000007949

1. Entity Name
CYPRESS LAKES COMMUNITY ASSOCIATION, INC.

Principal Place of Business	Mailing Address
ONE NORTH CLEMATIS STREET SUITE 305 WEST PALM BEACH, FL 33401	ONE NORTH CLEMATIS STREET SUITE 305 WEST PALM BEACH, FL 33401

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
882 Jackson Ave Suite, Apt. #, etc.	882 Jackson Ave Suite, Apt. #, etc.
City & State: Winter Park, FL	City & State: Winter Park, FL
Zip: 32789 Country:	Zip: 32789 Country:

4. FEI Number: 65-1133831 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORKERY, THOMAS J
2304-A WINTER WOODS BLVD
WINTER PARK, FL 32792

7. Name and Address of New Registered Agent

Name: Davis, Kevin
Street Address (P.O. Box Number is Not Acceptable): 882 Jackson Ave
City: Winter Park FL Zip Code: 32789

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] 4/2/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when applicable) Date

FILE NOW - FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CORKERY, THOMAS J 2304-A WINTER WOODS BLVD. WINTER PARK, FL 32792	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Jerman, Richard 1750 W. Broadway St., #118 Oviedo, FL 32765	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD KOSOY, BRIAN D ONE NORH CLEMATIS STREET SUITE 306 WEST PALM BEACH, FL 33401	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD JAROSZWICZ, JAN ONE NORH CLEMATIS STREET SUITE 306 WEST PALM BEACH, FL 33401	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD COSTELLO, VINCENT ONE NORH CLEMATIS STREET SUITE 306 WEST PALM BEACH, FL 33401	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Costello, Vincent	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVT SHREEVE, DAVID J ONE NORH CLEMATIS STREET SUITE 306 WEST PALM BEACH, FL 33401	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 4/18/03 407-971-1010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #