## 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 747951** 

Entity Name: CYPRESS LAKES MASTER HOMEOWNERS ASSOCIATION,

INC

**Current Principal Place of Business:** 

3445 CYPRESS TRAIL

WEST PALM BEACH, FL 33417

**Current Mailing Address:** 

3445 CYPRESS TRAIL

WEST PALM BEACH, FL 33417 US

FEI Number: 59-2538729 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIATED CORPORATE SERVICES 6111 BROKEN SOUND PARKWAY NW SUITE 200

BOCA RATON, FL 33487 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: LOUIS CAPLAN, ESQUIRE 07/29/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VI

Name MARGULIES, JOSEPHINE Name GOTTLIEB, MEL

Address 3445 CYPRESS TRAIL Address 3445 CYPRESS TRAIL

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

TitleTREASURERTitleSECRETARYNameGUGLIELMO, MIKENameWOJYN, FRAN

Address 3445 CYPRESS TRAIL Address 3445 CYPRESS TRAIL

City-State-Zip: WEST PALM BEACH FL 33417 City-State-Zip: WEST PALM BEACH FL 33417

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: JOSEPHINE MARGULIES

**PRESIDENT** 

07/29/2016

**FILED** 

Jul 29, 2016

Secretary of State CC2871744616