

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755641

Entity Name: CYPRESSWOOD'S VILLAS ON THE GREEN HOMEOWNERS' ASSOCIATION, INC.**FILED**
Mar 03, 2020
Secretary of State
3999495763CC**Current Principal Place of Business:**1631 E VINE ST
SUITE 300
KISSIMMEE, FL 34744**Current Mailing Address:**1631 E VINE ST
SUITE 300
KISSIMMEE, FL 34744 US**FEI Number: 59-2252748****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ARTEMIS LIFESTYLE SERVICES, INC.
1631 E VINE ST
SUITE 300
KISSIMMEE, FL 34744 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: DAVID BURMAN****03/03/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** SECRETARY
Name TURBYFIL, SABRINA
Address 1631 E VINE ST
SUITE 300
City-State-Zip: KISSIMMEE FL 34744**Title** DIRECTOR
Name HALL, ISAAC
Address 1631 E VINE ST
SUITE 300
City-State-Zip: KISSIMMEE FL 34744**Title** TREASURER
Name YUAN, NANCY
Address 8390 CHAMPIONSGATE BLVD
SUITE 304
City-State-Zip: CHAMPIONSGATE FL 33896**Title** VP
Name RAINE, JEANNETTE
Address 1631 E VINE ST
SUITE 300
City-State-Zip: KISSIMMEE FL 34744**Title** PRESIDENT
Name SYLVESTER, LAURIE
Address 1631 E VINE ST
SUITE 300
City-State-Zip: KISSIMMEE FL 34744**Title** DIRECTOR
Name PURNELL, DOUG
Address 8390 CHAMPIONSGATE BLVD
SUITE 304
City-State-Zip: CHAMPIONSGATE FL 33896**Title** DIRECTOR
Name KERNER, HOWARD
Address 1631 E VINE ST
SUITE 300
City-State-Zip: KISSIMMEE FL 34744**Title** DIRECTOR
Name MAYO, ED
Address 1631 E VINE ST
SUITE 300
City-State-Zip: KISSIMMEE FL 34744

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: LAURIE SYLVESTER**PRESIDENT****03/03/2020**

Electronic Signature of Signing Officer/Director Detail

Date