## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 768376** 

Entity Name: CYPRESSWOOD GOLF VILLAS HOMEOWNERS'

ASSOCIATION, INC.

1631 E VINE ST

KISSIMMEE, FL 34744

## **Current Principal Place of Business:**

SUITE 300

## **Current Mailing Address:**

1631 E VINE ST SUITE 300

KISSIMMEE, FL 34744 US

FEI Number: 59-2953569 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

AEGIS COMMUNITY MANAGEMENT SOLUTIONS, 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 L BURMAN 04/19/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title VΡ

MURPHY, WILLIAM NEHER, ALLEN Name Name

Address 8390 CHAMPIONSGATE BLVD. Address 8390 CHAMPIONSGATE BLVD.

SUITE 304 SUITE 304

CHAMPIONSGATE FL 33896 CHAMPIONSGATE FL 33896 City-State-Zip: City-State-Zip:

Title PRESIDENT, TREASURER Title SECRETARY

MULLEN, RODNEY BUCKLAND, THERESA Name Name

8390 CHAMPIONSGATE BLVD. Address 8390 CHAMPIONSGATE BLVD. Address

SUITE 304 SUITE 304

City-State-Zip: CHAMPIONSGATE FL 33896 City-State-Zip: CHAMPIONSGATE FL 33896

Title **DIRECTOR** Name NOOR, ALEX

Address 8390 CHAMPIONSGATE BLVD.

SUITE 304

City-State-Zip: CHAMPIONSGATE FL 33896

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: RODNEY MULLEN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/19/2019

**FILED** Apr 19, 2019

**Secretary of State** 

0830544101CC