

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003458

FILED
May 01, 2013
Secretary of State
CC8900750957

Entity Name: CYPRESS POINTE OF MACCLENNY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

600 LARGO LANE
MACCLENNY, FL 32063

Current Mailing Address:

CYPRESS POINTE OF MACLENNY HOMEOWNERS ASSOCIATION
P. O. BOX 1915
MACCLENNY, FL 32063 US

FEI Number: 54-2453610

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CYPRESS POINTE OF MACCLENNY HOMEOWNERS ASSOCIATION
CYPRESS POINTE OF MACLENNY HOMEOWNERS ASSOCIATION
P. O. BOX 1915
MACCLENNY, FL 32063 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: JOHN K. TAYLOR **05/01/2013**

Electronic Signature of Registered Agent Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP, TREASURER
Name	TAYLOR, JOHN K	Name	SMITH, RICKY D
Address	764 LARGO LANE	Address	699 ISLAMORADA DR. N
City-State-Zip:	MACCLENNY FL 32063	City-State-Zip:	MACCLENNY FL 32063

Title SECRETARY
Name KREUTZ, AMY
Address 474 ISLAMORADA DR. S
City-State-Zip: MACCLENNY FL 32063

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: JOHN K. TAYLOR **PRESIDENT** **05/01/2013**

Electronic Signature of Signing Officer/Director Detail Date