

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 09, 2015
Secretary of State
CC9479374383

Entity Name: CYPRESS POINTE OF POLK COUNTY HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8390 CHAMPIONSGATE BLVD
CHAMPIONSGATE, FL 33896

Current Mailing Address:

8390 CHAMPIONSGATE BLVD
#304
CHAMPIONSGATE, FL 33896 US

FEI Number: 26-1980301

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AEGIS COMMUNITY MANAGEMENT SOLUTIONS, INC.
8390 CHAMPIONSGATE BLVD
#304
CHAMPIONSGATE, FL 33896 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

01/09/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MARSHALL, JIM
Address 8390 CHAMPIONSGATE BLVD
City-State-Zip: CHAMPIONSGATE FL 33896

Title VP
Name MCQUISTAN, MARK
Address 8390 CHAMPIONSGATE BLVD
 #304
City-State-Zip: CHAMPIONSGATE FL 33896

Title TREASURER
Name COGGILL, MARK
Address 8390 CHAMPIONSGATE BLVD
 #304
City-State-Zip: CHAMPIONSGATE FL 33896

Title SECRETARY
Name JEOFFORY, ANDRE
Address 8390 CHAMPIONSGATE BLVD
 #304
City-State-Zip: CHAMPIONSGATE FL 33896

Title DIRECTOR
Name VALLE, JERRY
Address 8390 CHAMPIONSGATE BLVD
 #304
City-State-Zip: CHAMPIONSGATE FL 33896

Title DIRECTOR
Name TROTT, STEPHAN
Address 8390 CHAMPIONSGATE BLVD
 #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: JIM MARSHALL

PRESIDENT

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date