2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006450

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 03/01/2016

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** VΡ Title

Name MARSHALL, JIM Name MCQUISTAN, MARK

Address 8390 CHAMPIONSGATE BLVD Address 8390 CHAMPIONSGATE BLVD

#304 CHAMPIONSGATE FL 33896 City-State-Zip:

City-State-Zip: CHAMPIONSGATE FL 33896

Title **TREASURER DIRECTOR** Title

COGGILL, MARK Name Name JEOFFORY, ANDRE

8390 CHAMPIONSGATE BLVD Address Address 8390 CHAMPIONSGATE BLVD #304

#304 CHAMPIONSGATE FL 33896

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

Title **SECRETARY** Title

Name VALLE, JERRY Name TROTT, STEPHAN

Address 8390 CHAMPIONSGATE BLVD Address 8390 CHAMPIONSGATE BLVD #304

#304

DIRECTOR

City-State-Zip: CHAMPIONSGATE FL 33896 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** 03/01/2016

FILED Mar 01, 2016

Secretary of State

CC2337814304