## 2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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 06/14/2018

Electronic Signature of Registered Agent

City-State-Zip:

CHAMPIONSGATE FL 33896

Officer/Director Detail:

Title **PRESIDENT** Title VΡ

NEILL, RODERICK Name COGGILL, MARK Name

Address 8390 CHAMPIONSGATE BLVD Address 8390 CHAMPIONSGATE BLVD

#304 CHAMPIONSGATE FL 33896 City-State-Zip:

City-State-Zip: CHAMPIONSGATE FL 33896

Title **SECRETARY** Name

LANSING, ALBERT Name VALLE, JERRY

8390 CHAMPIONSGATE BLVD Address Address 8390 CHAMPIONSGATE BLVD #304

#304 CHAMPIONSGATE FL 33896

Title **DIRECTOR** 

Title

City-State-Zip:

Name TROTT, STEPHEN

8390 CHAMPIONSGATE BLVD Address

**TREASURER** 

#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.

06/14/2018 SIGNATURE: MARK COGGILL **PRESIDENT** 

Date

**FILED** 

Jun 14, 2018

**Secretary of State** CC7655635389