

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17208

Entity Name: CYPRESS SPRINGS OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5200 VINELAND ROAD
SUITE 210
ORLANDO, FL 32811**Current Mailing Address:**5200 VINELAND ROAD
SUITE 210
ORLANDO, FL 32811 US**FEI Number:** 59-2762596**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PALMERSTON, LLC
5200 VINELAND ROAD
SUITE 210
ORLANDO, FL 32811 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	HOOVER, CHERYL
Address	5200 VINELAND ROAD, SUITE 210
City-State-Zip:	ORLANDO FL 32811

Title	VPD
Name	BOUTTE, CLYDE
Address	5200 VINELAND ROAD, SUITE 210
City-State-Zip:	ORLANDO FL 32811

Title	TD
Name	KIM, DOHYUN
Address	5200 VINELAND ROAD, SUITE 210
City-State-Zip:	ORLANDO FL 32811

Title	D
Name	PASSARELLA, JOHN
Address	5200 VINELAND ROAD, SUITE 210
City-State-Zip:	ORLANDO FL 32811

Title	SD
Name	POWERY, NANCY
Address	5200 VINELAND ROAD, SUITE 210
City-State-Zip:	ORLANDO FL 32811

Title	D
Name	HENDRICKS, BILL
Address	5200 VINELAND RD SUITE 210
City-State-Zip:	ORLANDO FL 32811

Title	D
Name	MITCHELL, LINDA
Address	5200 VINELAND ROAD SUITE 210
City-State-Zip:	ORLANDO FL 32811

Title	D
Name	HUNT, WAYNE
Address	5200 VINELAND ROAD SUITE 210
City-State-Zip:	ORLANDO FL 32811

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: CHERYL HOOVER**PRESIDENT****03/05/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date