

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17503

**FILED**  
**Apr 05, 2019**  
**Secretary of State**  
**4682124806CC**

**Entity Name:** CYPRESS KEEP CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O RAL RESORT PROPERTY MANAGEMENT, INC.  
17810 SAN CARLOS BLVD  
FORT MYERS BEACH, FL 33931

**Current Mailing Address:**

C/O RAL RESORT PROPERTY MANAGEMENT, INC.  
17810 SAN CARLOS BLVD  
FORT MYERS BEACH, FL 33931 US

**FEI Number:** 59-2773863

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TROPICAL ISLES MANAGEMENT  
C/O RAL RESORT PROPERTY MANAGEMENT, INC.  
17810 SAN CARLOS BLVD  
FORT MYERS BEACH, FL 33931 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:** MARK RUDLAND

04/05/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MCCLEARY, LEE  
Address C/O RAL RESORT PROPERTY MANAGEMENT, INC.  
17810 SAN CARLOS BLVD  
City-State-Zip: FORT MYERS BEACH FL 33931

Title S  
Name RIVERA, JACQUELINE  
Address C/O RAL RESORT PROPERTY MANAGEMENT, INC.  
17810 SAN CARLOS BLVD  
City-State-Zip: FORT MYERS BEACH FL 33931

Title TREASURER  
Name KATZABA, JOSEPH  
Address C/O RAL RESORT PROPERTY MANAGEMENT, INC.  
17810 SAN CARLOS BLVD  
City-State-Zip: FORT MYERS BEACH FL 33931

Title VP  
Name LANE, BRADFORD  
Address C/O RAL RESORT PROPERTY MANAGEMENT, INC.  
17810 SAN CARLOS BLVD  
City-State-Zip: FORT MYERS BEACH FL 33931

Title CAM  
Name HAGAR, MAGDELAINA  
Address C/O RAL RESORT PROPERTY MANAGEMENT, INC.  
17810 SAN CARLOS BLVD  
City-State-Zip: FORT MYERS BEACH FL 33931

*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:** MAGDELAINA HAGAR

CAM

04/05/2019

Electronic Signature of Signing Officer/Director Detail

Date