

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N17503

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

**Current Principal Place of Business:**

C/O FIRSTSERVICE RESIDENTIAL  
10600 10600 CHEVROLET WAY SUITE 202  
ESTERO , FL 33928

**Current Mailing Address:**

C/O FIRSTSERVICE RESIDENTIAL  
10600 CHEVROLET WAY SUITE 202  
ESTERO , FL 33928 US

**FEI Number:** 59-2773863

**Certificate of Status Desired:** No

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

FIRSTSERVICE RESIDENTIAL  
C/O FIRSTSERVICE RESIDENTIAL  
10600 CHEVROLET WAY SUITE 202  
ESTERO , FL 33928 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:** LAUREN HARVILLE

05/26/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name RIVERA, JACQUELINE  
Address C/O FIRSTSERVICE RESIDENTIAL  
10600 CHEVROLET WAY SUITE 202  
City-State-Zip: ESTERO FL 33928

Title TREASURER  
Name DEVORE, NICOLE  
Address C/O FIRSTSERVICE RESIDENTIAL  
10600 CHEVROLET WAY SUITE 202  
City-State-Zip: ESTERO FL 33928

Title DIRECTOR  
Name BLOUSE, SANDRA  
Address C/O FIRSTSERVICE RESIDENTIAL  
10600 CHEVROLET WAY SUITE 202  
City-State-Zip: ESTERO FL 33928

Title PRESIDENT  
Name HARVILLE, LAUREN  
Address C/O FIRSTSERVICE RESIDENTIAL  
10600 CHEVROLET WAY SUITE 202  
City-State-Zip: ESTERO FL 33928

Title CAM  
Name HAGAR, MAGDELAINA  
Address C/O FIRSTSERVICE RESIDENTIAL  
10600 CHEVROLET WAY SUITE 202  
City-State-Zip: ESTERO FL 33928

Title VP  
Name FRISONE, BARBARA  
Address C/O FIRSTSERVICE RESIDENTIAL  
10600 CHEVROLET WAY SUITE 202  
City-State-Zip: ESTERO FL 33928

*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:** LAUREN HARVILLE

**PRESIDENT**

05/26/2023

Electronic Signature of Signing Officer/Director Detail

Date