

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# N17503

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:

RAL RESORT PROPERTY MANAGEMENT, INC.
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: MAGDELAINA HAGAR

10/04/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

Title PRESIDENT
Name MABRY, CATHY
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

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

Title VP
Name BUNDA, KAY
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

10/04/2021

Electronic Signature of Signing Officer/Director Detail

Date