

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50757

**FILED**  
**Jan 25, 2015**  
**Secretary of State**  
**CC7789293210**

**Entity Name:** CYPRESS CREEK HOMEOWNERS ASSOCIATION OF BREVARD, INC.

**Current Principal Place of Business:**

C/O CLAIRE ZORYK  
3630 PAINTED BUNTING PL  
GRANT, FL 32949

**Current Mailing Address:**

C/O CLAIRE ZORYK  
3630 PAINTED BUNTING PL  
GRANT, FL 32949

**FEI Number: 65-0388677**

**Certificate of Status Desired: No**

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

ZORYK, CLAIRE  
3630 PAINTED BUNTING PL  
GRANT, FL 32949 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           VP  
Name           ACKMAN II, RICHARD  
Address        5684 CYPRESS CREEK DRIVE  
City-State-Zip: GRANT FL 32949

Title           PRES  
Name           KOLAR, LISETTE  
Address        5180 RED BAY LANE  
City-State-Zip: GRANT FL 32949

Title           SEC  
Name           URAVITCH, RICHARD  
Address        5629 CYPRESS CREEK DR  
City-State-Zip: GRANT FL 32949

Title           TREA  
Name           DANIELS, TRISH  
Address        5622 LOBOLLY PLACE  
City-State-Zip: GRANT FL 32949

Title           DIRE  
Name           BURGE, DON  
Address        3620 FICUS PLACE  
City-State-Zip: GRANT FL 32949

*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: LISETTE KOLAR**

**PRESIDENT**

**01/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date