

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

DOCUMENT# N93000000026

**FILED**  
**Feb 11, 2015**  
**Secretary of State**  
**CC3761791149**

**Entity Name:** CYPRESS COVE OF MARGATE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

SWIFT MANAGEMENT & SOLUTIONS  
1750 UNIVERSITY DR #205  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

SWIFT MANAGEMENT & SOLUTIONS  
1750 UNIVERSITY DR #205  
CORAL SPRINGS, FL 33071 US

**FEI Number: 65-0418612**

**Certificate of Status Desired: No**

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

SWIFT MANGEMENT & SOLUTIONS  
1750 UNIVERSITY DR #205  
CORAL SPRINGS, FL 33071 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	Title	PRES
Name	ABSTENCIO, MARITZA	Name	PRICE, ALBERT
Address	2021 BARCELONA TERRACE	Address	7495 VISCAYA CIRCLE
City-State-Zip:	MARGATE FL 33063	City-State-Zip:	MARGATE FL 33063
Title	SECY	Title	TREAS
Name	WEEKES, YVETTE	Name	GOTTESMAN, SUSAN
Address	2001 BARCELONA TR	Address	7325 VISCAYA CIR.
City-State-Zip:	MARGATE FL 33063	City-State-Zip:	MARGATE FL 33063

*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: ALBERT PRICE**

**PRES**

**02/11/2015**

Electronic Signature of Signing Officer/Director Detail

Date