

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003903

Entity Name: CYPRESS HEAD RESIDENTIAL HOMEOWNER'S ASSOCIATION, INC.

FILED
Jan 09, 2017
Secretary of State
CC0920508821

Current Principal Place of Business:

5889 S WILLIAMSON BLVD STE 1301
PORT ORANGE, FL 32128

Current Mailing Address:

5889 S WILLIAMSON BLVD STE 1301
PORT ORANGE, FL 32128 US

FEI Number: 59-3263115

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEBER, CHERYL
5889 S WILLIAMSON BLVD STE 1301
PORT ORANGE, FL 32128 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 PRESIDENT
Name LEE, RICH
Address 6393 LONGLAKE DRIVE
City-State-Zip: PORT ORANGE FL 32128

Title SECRETARY
Name DICHARA, PAULA
Address 6388 LONGLAKE DRIVE
City-State-Zip: PORT ORANGE FL 32128

Title DIRECTOR
Name CAMPION, TOM
Address 6455 LONGLAKE DRIVE
City-State-Zip: PORT ORANGE FL 32128

Title DIRECTOR
Name CARNEY, DIANE
Address 6385 LONGLAKE DR.
City-State-Zip: PORT ORANGE FL 32128

Title TREASURER
Name REYNOLDS, CRAIG
Address 6459 LONDLAKE DR.
City-State-Zip: PORT ORANGE FL 32128

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: LEE , RICH

PRESIDENT

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date