

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003903

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

FILED
Feb 21, 2018
Secretary of State
CC2108040001

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 VP
Name DICHARA, PAULA
Address 5889 S WILLIAMSON BLVD STE 1301
City-State-Zip: PORT ORANGE FL 32128

Title DIRECTOR
Name CARNEY, DIANE
Address 5889 S WILLIAMSON BLVD STE 1301
City-State-Zip: PORT ORANGE FL 32128

Title PRESIDENT
Name PETERSEN, CHRISTIAN
Address 5889 S WILLIAMSON BLVD STE 1301
City-State-Zip: PORT ORANGE FL 32128

Title SECRETARY
Name VAUGHN, NANCY
Address 5889 S WILLIAMSON BLVD STE 1301
City-State-Zip: PORT ORANGE FL 32128

Title TREASURER
Name BENNETT, MAUREEN
Address 5889 S WILLIAMSON BLVD STE 1301
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: CHRISTIAN PETERSEN

PRESIDENT

02/21/2018

Electronic Signature of Signing Officer/Director Detail

Date