

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003903

FILED
Feb 28, 2020
Secretary of State
6464932950CC

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

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

Title TREASURER
Name SHEFFIELD, MICHAEL
Address 5889 S WILLIAMSON BLVD STE 1301
City-State-Zip: PORT ORANGE FL 32128

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

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

Title DIRECTOR
Name HOFFMAN, DAVE
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: JOSEPH VERACKA

PRESIDENT

02/28/2020

Electronic Signature of Signing Officer/Director Detail

Date