

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N95000005507

**Entity Name:** THE CYPRESS POINTE RESORT II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

12118 TURTLE CAY CIRCLE  
ORLANDO, FL 32836

**Current Mailing Address:**

10600 W CHARLESTON BLVD  
LAS VEGAS, NV 89135 US

**FEI Number: 50-3388248**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 P, DIRECTOR  
Name PELOSI, CHERYL  
Address 10600 W CHARLESTON BLVD  
City-State-Zip: LAS VEGAS NV 89135

Title SECRETARY, TREASURER,  
DIRECTOR  
Name GALE, LESLIE  
Address 10600 WEST CHARLESTON BLVD  
City-State-Zip: LAS VEGAS NV 89135

Title VP, DIRECTOR  
Name KURTZ, SHANNON  
Address 10600 W CHARLESTON BLVD  
City-State-Zip: LAS VEGAS NV 89135

Title DIRECTOR  
Name TOSTE, JASON  
Address 10600 W CHARLESTON BLVD  
City-State-Zip: LAS VEGAS NV 89135

Title DIRECTOR  
Name PATTERSON, ROGER D.  
Address 10600 W CHARLESTON BLVD  
City-State-Zip: LAS VEGAS NV 89135

*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: CHERYL PELOSI**

**PRESIDENT**

**02/05/2020**

Electronic Signature of Signing Officer/Director Detail

Date