

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000005697

**Entity Name:** CYPRESS POINTE NEIGHBORHOOD ASSOCIATION, INC.

**FILED**  
**Feb 02, 2016**  
**Secretary of State**  
**CC8064442418**

**Current Principal Place of Business:**

MIAMI MANAGEMENT INC  
1145 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323

**Current Mailing Address:**

MIAMI MANAGEMENT INC  
1145 SAWGRASS CORPORATE PKWY  
SUNRISE, FL 33323

**FEI Number: 59-2031220**

**Certificate of Status Desired: No**

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

TUCKER & TIGHE, P.A.  
800 E. BROWARD BLVD.  
SUITE 710  
FT. LAUDERDALE, FL 33301 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            D  
Name            LONDON, DENNIS  
Address        1145 SAWGRASS CORPORATE PKWY  
  
City-State-Zip: SUNRISE FL 33323

Title            S  
Name            FELLNER, MICHAEL  
Address        1145 SAWGRASS CORPORATE PKWY  
  
City-State-Zip: SUNRISE FL 33323

Title            DP  
Name            MURNANE, JOHN  
Address        1145 SAWGRASS CORPORATE PKWY  
  
City-State-Zip: SUNRISE FL 33323

*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: JOHN MURNANE**

**PRESIDENT**

**02/02/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date