

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003089

FILED
Jan 10, 2023
Secretary of State
1743934511CC

Entity Name: CYPRESS SPRINGS VILLAGE S HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4110 S. FLORIDA AVE; SUITE 200
LAKELAND, FL 33813

Current Mailing Address:

4110 S. FLORIDA AVE; SUITE 200
LAKELAND, FL 33813 US

FEI Number: 59-3681519

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HIGHLAND COMMUNITY MANAGEMENT, LLC
4110 S. FLORIDA AVE; SUITE 200
LAKELAND, FL 33813 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: DENISE ABERCROMBIE

01/10/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name FORD, ARLENE
Address 4110 S. FLORIDA AVE; SUITE 200
City-State-Zip: LAKELAND FL 33813

Title DIRECTOR
Name CARGILL, JAMES
Address 4110 S. FLORIDA AVE; SUITE 200
City-State-Zip: LAKELAND FL 33813

Title VP
Name MANABAHAL, OUDIT
Address 4110 S. FLORIDA AVE; SUITE 200
City-State-Zip: LAKELAND FL 33813

Title T
Name TRAPANI, BRUCE
Address 4110 S. FLORIDA AVE; SUITE 200
City-State-Zip: LAKELAND FL 33813

Title SECRETARY
Name MCDONALD, ISABEL
Address 4110 S. FLORIDA AVE; SUITE 200
City-State-Zip: LAKELAND FL 33813

Title DIRECTOR
Name TRINH, PHUONG
Address 4110 S. FLORIDA AVE; SUITE 200
City-State-Zip: LAKELAND FL 33813

Title DIRECTOR
Name NASH, JOE
Address 4110 S. FLORIDA AVE; SUITE 200
City-State-Zip: LAKELAND FL 33813

Title DIRECTOR
Name SEMPIER, CHRIS
Address 4110 S. FLORIDA AVE; SUITE 200
City-State-Zip: LAKELAND FL 33813

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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: ELIZABETH ACOSTA

PRESIDENT

01/10/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name ACOSTA, ELIZABETH
Address 4110 S. FLORIDA AVE; SUITE 200
City-State-Zip: LAKELAND FL 33813