

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90014 048 ****61.25

DOCUMENT # 715571 1. Entity Name CYPRESS GARDENS CONDOMINIUM, INC.					
Principal Place of Business 2219-2225 PLK ST. HOLLYWOOD, FL 33020			Mailing Address 2219-2225 PLK ST. HOLLYWOOD, FL 33020		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>AB Prop. Mgmt.</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc. <i>220</i>			
City & State		City & State <i>Tamara, FL</i>			
Zip	Country	Zip <i>33321</i>	Country <i>USA</i>	4. FEI Number 59-1285770	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CYPRESS GARDENS CONDO ASSN. 2219 POLK ST. HOLLYWOOD, FL 33020			7. Name and Address of New Registered Agent Name <i>AB Property Management</i> Street Address (P.O. Box Number is Not Acceptable) <i>Suite 220, 7300 N. McNab Rd</i> City <i>Tamara</i> FL Zip Code <i>33321</i>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Mary Horn</i> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCGOWAN, KATHRYN 2219 POLK STREET HOLLYWOOD, FL 33020 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>P</i> ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RIZZACASA, ROBEERT 2225 POLK STREET 3A HOLLYWOOD, FL 33020 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BELANGER, MICHELLE 2225 POLK ST., #103 HOLLYWOOD, FL 33020 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HORN, MARY 2219 POLK STREET HOLLYWOOD, FL 33020 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROMANO, MARIO 2225 POLK ST. HOLLYWOOD, FL 33020 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Mary Horn</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date				Daytime Phone #	