

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90052 032 ****61.25

DOCUMENT # 720830

1. Entity Name

CYPRESS ANCHORAGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

1400 NE 55TH STREET
FT LAUDERDALE FL 33334

Mailing Address

1400 NE 55TH STREET
FT LAUDERDALE FL 33334



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

City & State

4. FEI Number

59-1425004

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~HAYES, COLIN~~
~~1400 NE 55TH ST.~~
~~SUITE 205~~
~~FORT LAUDERDALE FL 33334~~

Name

SHEILA MALONE-JONES

Street Address (P.O. Box Number is Not Acceptable)

1400 NE 55TH ST. # 103

City

FORT LAUDERDALE FL

Zip Code

33334

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW FEE IS \$61.25

Due By May 1, 2008

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

TITLE ~~VP~~ ☒ Delete
NAME ~~MALONE-JONES, SHEILA~~
STREET ADDRESS ~~1400 NE 55TH ST #103~~
CITY- ST- ZIP ~~FORT LAUDERDALE FL 33334~~

TITLE ☐ Delete
NAME **BECKER, JOHN**
STREET ADDRESS **1400 NE 55TH ST #105**
CITY- ST- ZIP **FORT LAUDERDALE FL 33334**

TITLE ☐ Delete
NAME **SMITH, JEANNE G**
STREET ADDRESS **1400 NE 55TH ST #207**
CITY- ST- ZIP **FT LAUDERDALE FL**

TITLE ☐ Delete
NAME **WRANOVICS, ROBERT JR**
STREET ADDRESS **1400 NE 55TH ST # 104**
CITY- ST- ZIP **FORT LAUDERDALE FL 33334**

TITLE ☐ Delete
NAME ~~GUIDISH, JEFFREY~~
STREET ADDRESS ~~1400 NE 55 ST #109~~
CITY- ST- ZIP ~~FORT LAUDERDALE FL 33334~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** ☒ Change ☐ Addition
NAME **JEFFREY GUIDISH**
STREET ADDRESS **1400 NE 55TH ST #109**
CITY- ST- ZIP **FORT LAUDERDALE FL 33334**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Sheila Malone-Jones

4/21/08 (954) 862-3221