725372

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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COVÊR LETTER

TO: Amendment Section Division: of Corporations				
1				
SUBJECT: Cypress Bend Condominium	m I Association Inc			
Name of Cor	poration			
DOCUMENT NUMBER: 72	25372			
The enclosed Statement of Change of Registered Office/A	Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to	the following:			
· · · · · · · · ·	J			
David M. Bau	man, Esq.			
Name of Conta	act Person			
t.				
Bauman & Kanner, P.A.				
Firm/Com	pany			
i H				
4050 W. Brov				
Addres	SS			
Plantation F	1 33317			
Plantation, FL 33317 City/State and Zip Code				
11	•			
GinnyLonow@aol.com				
E-mail address: (to be used for futi	ure annual report notification)			
*				
For further information concerning this matter, please cal	l:			
ր David M. Bauman, Esq.	at (954) 424-3306			
Name of Contact Person	Area Code & Daytime Telephone Number			
ϵ	• •			
Enclosed is a \$35.00 check made payable to the Departm	ent of State.			
8				
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
il L	Tallahassee, FL 32301			

CR2E045 (8/05)



May 12, 2010

DAVID M. BAUMAN, ESQ. BAUMAN & KANNER, P.A. 4050 W. BROWARD BLVD. PLANTATION, FL 33317

SUBJECT: CYPRESS BEND CONDOMINIUM I ASSOCIATION, INC.

Ref. Number: 725372

We have received your document for CYPRESS BEND CONDOMINIUM I ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 210A00012033



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chai	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	the corporation: Cypress Bend Condominium I Association, Inc.	
	office address: 2320 S Cypress Bend Drive, Suite 101, Beach, FL 33069	
3. The mailing a	ा ddress (if different):	
4. Date of incorp	poration/qualification: 1/26/73 Document number: 725372	
	d street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	and it waster
	Kaye & Bender PL.	1.
	1200 Park Central Boulevard South	-
	Pompano Beach, FL 33064	
6. The name and (if changed):	Street address of the new registered agent (if changed) and /or registered office VIQGIMIA L. LONOW Cypress Bond Condominium One Association Attention: Virginia	
ਜ -	2320 S Cypress Bend Drive, Ste. 101	
	P.O. Box NOT acceptable Pompano Beach, FL 33069	
	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	, ch
I hereby accept I further agree to of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity. It is comply with the provisions of all statutes relative to the proper and complete performance and familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the speem notified in writing of this change.	
Cypless Sig	Bendlon don: "Fun Ove 05-05-10 mature of Registered Agendassoc. Inc. Date	
Virginia	Estalf of an entity: J. Loven Treson Virginia L. Loven Theory Typed or Printed Name	was
	* * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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