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May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **725808** **(0)**

1. Corporation Name

CYPRESS LANDING IMPROVEMENT ASSOCIATION INC

Principal Place of Business	Mailing Address
116 CYPRESS LANDING JACKSONVILLE FL 32259-9670	111 CYPRESS LANDING JACKSONVILLE FL 32259-3818 US

3. Date Incorporated or Qualified: **03/13/1973**
3a. Date of Last Report: **05/01/1996**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: **NOT APPLICABLE** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WILLIAMS, ROBERT B. JR.
111 CYPRESS LANDING
JACKSONVILLE FL 32259

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	PD	☑ Change ☐ Addition
NAME	LASZLO, MARK		1.2 NAME	MACKIE, A. WILLIAM	
STREET ADDRESS	106 CYPRESS LANDING		1.3 STREET ADDRESS	101 CYPRESS LANDING	
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP	JAX, FL 32259	
TITLE	VD	☐ DELETE	2.1 TITLE	VP	☑ Change ☐ Addition
NAME	STRINGER, HARVEY "BO"		2.2 NAME	KAISER, FRED	
STREET ADDRESS	108 CYPRESS LANDING		2.3 STREET ADDRESS	106 CYPRESS LANDING	
CITY-ST-ZIP	JACKSONVILLE FL		2.4 CITY-ST-ZIP	JAX, FL 32259	
TITLE	TD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	WILLIAMS, ROBERT B JR		3.2 NAME		
STREET ADDRESS	111 CYPRESS LANDING		3.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		3.4 CITY-ST-ZIP		
TITLE	SD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SCHUTT, KATHY		4.2 NAME		
STREET ADDRESS	115 CYPRESS LANDING		4.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.