

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729140

FILED
Mar 31, 2010
Secretary of State

Entity Name: CYPRESS WOODS, INC.

Current Principal Place of Business:

5401 S. KIRKMAN ROAD
STE. 450
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

5401 S. KIRKMAN ROAD
STE. 450
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 59-2077076 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT PROFESSIONALS
5401 S. KIRKMAN RD.
STE. 450
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: MCMULLEN, SID
Address: 5466 PINE CREEK DRIVE
City-St-Zip: ORLANDO, FL 32811

Title: VP
Name: HIRIBARNE, BERNI
Address: 5317 INDIAN CREEK
City-St-Zip: ORLANDO, FL 32811

Title: S
Name: LENTSCH, PAT
Address: 5414 PINE CREEK
City-St-Zip: ORLANDO, FL 32811

Title: T
Name: TRIFILIO, RUBEN
Address: 5320 BURNING TREE
City-St-Zip: ORLANDO, FL 32811

Title: D
Name: GROSCH, RANDY
Address: 4820 PEBBLE BEACH
City-St-Zip: ORLANDO, FL 32811

Title: D
Name: WARDLAW, SHERI
Address: 5350 BURNING TREE
City-St-Zip: ORLANDO, FL 32811

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: SID MCMULLEN

P

03/31/2010

Electronic Signature of Signing Officer or Director

_____ Date