2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734399

FILED Apr 04, 2006 Secretary of State

Entity Name: CYPRESS VILLAGE - CORONADO MOORS ASSOCIATION, INC

Current Principal Place of Business: New Principal Place of Business:

1439 N LARKWOOD 1503 CRANVILLE SQ.

FT MEYERS, FL 33919 US FT MYERS, FL 33919 US

Current Mailing Address: New Mailing Address:

PO BOX 07011

FT. MYERS, FL 33919 US

FEI Number: 59-1930100 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BERGMANN, HARRY

1439 N LARKWOOD

FT MYERS, FL 33919

US

MANKOWSKI, ROBERT

1503 CRANVILLE SQ.

FT MYERS, FL 33919

US

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: ROBERT MANKOWSKI 04/04/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PTD () Delete Title: PD (X) Change () Addition

 Name:
 BERGMANN, HARRY
 Name:
 MANKOWSKI, ROBERT

 Address:
 1439 N LARKWOOD
 Address:
 1503 CRANVILLE SQ.

 City-St-Zip:
 FT MYERS, FL 33919
 City-St-Zip:
 FT MYERS, FL 33919

Title: D () Delete Title: VPD (X) Change () Addition Name: TAYLOR, HERB Name: TAYLOR, HERB

 Name:
 TAYLOR, HERB
 Name:
 TAYLOR, HERB

 Address:
 6889 MARBROOK CT
 Address:
 6889 MARBROOK CT

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:
 FORT MYERS, FL 33919

Title: VPD () Delete Title: TD (X) Change () Addition

 Name:
 COE, ROB
 Name:
 ANCEFSKY, CATHY

 Address:
 6947 PICKADILLY COURT
 Address:
 6908 MARBROOK CT.

 City-St-Zip:
 FT. MYERS, FL
 City-St-Zip:
 FT. MYERS, FL 33919

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 LUCKEY, CHARLES
 Name:
 MCCARTY, MARIA

 Address:
 6909 MARBROOK CT
 Address:
 6909 MARBROOK CT

 City-St-Zip:
 FORT MYERS, FL 33919
 City-St-Zip:
 FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT MANKOWSKI PD 04/04/2006