2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734399

FILED Feb 05, 2007 Secretary of State

Entity Name: CYPRESS VILLAGE - CORONADO MOORS ASSOCIATION, INC

urrent P	rincipal Place	e of Business:	New Princi	pal Place of Business:
	NVILLE SQ. S, FL 33919	US		
urrent N	failing Addres	ss:	New Mailin	g Address:
O BOX 0 T. MYER	07011 RS, FL 33919	US		
El Number	: 59-1930100	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired ()
ame and	d Address of (Current Registered Agent:	Name and	Address of New Registered Agent:
503 CRA	/SKI, ROBERT NVILLE SQ. S, FL 33919	US		
	e named entity e of Florida.	submits this statement for the p	purpose of changing its	s registered office or registered agent, or both,
	e of Florida.	submits this statement for the p	purpose of changing its	s registered office or registered agent, or both,
the Stat	e of Florida. É RE:	submits this statement for the particles of Registered Ag		s registered office or registered agent, or both, Date
the Stat	e of Florida. É RE:	nic Signature of Registered Ag	ent	
the Stat	e of Florida. RE: Electron S AND DIREC	nic Signature of Registered Age TORS:) Delete ROBERT LE SQ.	ent	Date
the Stat IGNATU FFICER tle: ame: ddress:	e of Florida. RE: Electron S AND DIREC PD (MANKOWSKI, 1503 CRANVIL FT MYERS, FL	nic Signature of Registered Age ETORS:) Delete ROBERT LE SQ 33919) Delete B	ent ADDITIONS Title: Name: Address:	Date S/CHANGES TO OFFICERS AND DIRECTOR
the Stat IGNATU FFICER ttle: ame: ddress: tty-St-Zip: ttle: ame: ddress:	e of Florida. RE: Electrol S AND DIREC PD (MANKOWSKI, 1503 CRANVIL FT MYERS, FL VPD (TAYLOR, HER 6889 MARBRO FORT MYERS,	nic Signature of Registered Age FORS:) Delete ROBERT ILE SQ 33919) Delete B DOK CT FL 33919) Delete ATHY DOK CT.	ent ADDITIONS Title: Name: Address: City-St-Zip: Title: Name: Address:	Date S/CHANGES TO OFFICERS AND DIRECTOR () Change () Addition

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 P 02/05/2007