

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90011 045 ****61.25

DOCUMENT # 740949

1. Entity Name

CYPRESS PARK CONDO ASSOCIATION

W

Principal Place of Business

Mailing Address

140 S. CYPRESS RD.
 POMPANO BEACH, FL. 33060

977656

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE.

4. FEI Number

59-1794588

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CREST PROPERTY MGMT INC.
 4700 HIATUS RD.
 #156
 SUNRISE FL. 3333351

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Donald R. Clatter

7/16/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME PRESIDENT ☐ Delete
 STREET ADDRESS HENRY P. WILLIAMS
 CITY-ST-ZIP 126 S. CYPRESS RD. #715
 POMPANO BEACH, FLA. 33060

TITLE
 NAME DIRECTOR ☐ Change ☐ Addition
 STREET ADDRESS JOHN APPELLO
 CITY-ST-ZIP 140 S. CYPRESS RD. S#113
 POMPANO BEACH, FL. 33060

TITLE
 NAME VICE-PRES. ☐ Delete
 STREET ADDRESS RONALD P. LEGENDRE
 CITY-ST-ZIP 132 S. CYPRESS RD. #517
 POMPANO BEACH, FL. 33060

TITLE
 NAME DIRECTOR ☐ Change ☐ Addition
 STREET ADDRESS LESLIE SMITH CAMPBELL
 CITY-ST-ZIP 138 S. CYPRESS RD. POMPANO BEACH
 FL. 33060

TITLE
 NAME TREA. ☐ Delete
 STREET ADDRESS JOSEPH CLARK
 CITY-ST-ZIP 130 S. CYPRESS RD. #215
 POMPANO BEACH, FL. 33060

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME Secy. ☐ Delete
 STREET ADDRESS Anne F. Hollady
 CITY-ST-ZIP 126 S. CYPRESS RD. #736
 POMPANO BEACH, FL. 33060

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME DIRECTOR ☐ Delete
 STREET ADDRESS JOHN WELLER
 CITY-ST-ZIP 126 S. CYPRESS RD. #712
 POMPANO BEACH, FL. 33060

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

John Weller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/16/01

Date

Daytime Phone #

CR2E037 (11/00)