## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 749091** 

Feb 23, 2010 Secretary of State

Entity Name: CYPRESS LAKES HOMEOWNERS ASSOCIATION III-A, INC.

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

3445 CYPRESS TRAIL WEST PALM BEACH, FL 33417

**Current Mailing Address: New Mailing Address:** 

3445 CYPRESS TRAIL WEST PALM BEACH, FL 33417

FEI Number: 59-2285604 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:

GALVAGNI, MARIE GALVAGNI, MARIE PRES. 3327 AMERICO DRIVE 3327 AMERICO DRIVE

WEST PALM BEACH, FL 33417 WEST PALM BEACH, FL 33417 US 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: MARIE GALVAGNI 02/23/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

GALVAGNI, MARIE MRS. Name: Address: 3327 AMERICO DRIVE City-St-Zip: WEST PALM BEACH, FL 33417

Title:

Name: MARGULIES, JOSEPHINE MRS.

Address: 5293 MARIESA AVE.

City-St-Zip: WEST PALM BEACH, FL 33417

Title:

GRASSI, KATHRYN E MRS. Name: Address: 3376 CHRISTOPHER ST City-St-Zip: WEST PALM BEACH, FL 33417

Title: **RSEC** 

Name: MILLER, BETTY MS Address: 3424 ROSSI COURT

City-St-Zip: WEST PALM BEACH, FL 33417

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: KATHRYN E. GRASSI **TREA** 02/23/2010