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**Mar 16, 1999 8:00 am**  
**Secretary of State**

03-16-1999 90131 033 \*\*\*\*61.25

**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 750236**

1. Corporation Name

**CYPRESS BEND HOMEOWNERS ASSOCIATION OF COUNTRYSIDE, INC.**

Principal Place of Business

2585 WINDINGS WOOD DR  
CLEARWATER FL 33761  
US

Mailing Address

2585 WINDING WOOD DR  
CLEARWATER FL 33761  
US



\* 2 3 5 7 9 \*



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

12/17/1979

4. FEI Number

59-2455796

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

LEWIS, BARBARA  
2585 WINDING WOOD DR  
CLEARWATER FL 33761

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Barbara Lewis*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/6/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME P  
STREET ADDRESS LEWIS, BARBARA  
CITY-ST-ZIP 2585 WINDING WOOD DR  
CLEARWATER FL 33761

TITLE ☐ DELETE  
NAME VP  
STREET ADDRESS OPIE, MICHELLE  
CITY-ST-ZIP 2507 DOGWOOD CT  
CLEARWATER FL 33761

TITLE ☐ DELETE  
NAME T  
STREET ADDRESS HARBIG, NEIL  
CITY-ST-ZIP 2673 PEACHTREE CIR EAST  
CLEARWATER FL 33761

TITLE ☐ DELETE  
NAME S  
STREET ADDRESS SULLIVAN, MARY ELLEN  
CITY-ST-ZIP 2781 COTTONWOOD CT  
CLEARWATER FL 33761

TITLE ☒ DELETE  
NAME D  
STREET ADDRESS POTTS, MICHAEL  
CITY-ST-ZIP 2503 CYPRESS BEND DR  
CLEARWATER FL 33761

TITLE ☐ DELETE  
NAME D  
STREET ADDRESS SMITH, CHRISTA  
CITY-ST-ZIP 2521 CYPRESS BEND DR  
CLEARWATER FL 33761

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VICE PRESIDENT ☒ Change ☐ Addition  
1.2 NAME LYNDA POTTS  
1.3 STREET ADDRESS 2503 CYPRESS BEND DRIVE  
1.4 CITY-ST-ZIP CLEARWATER, FL 33761

2.1 TITLE TREASURER ☒ Change ☐ Addition  
2.2 NAME WAYNE DECKERT  
2.3 STREET ADDRESS 2510 BRIARWOOD COURT  
2.4 CITY-ST-ZIP CLEARWATER, FL 33761

3.1 TITLE DIRECTOR ☒ Change ☐ Addition  
3.2 NAME TEDDY THERYO  
3.3 STREET ADDRESS 2500 DOGWOOD COURT  
3.4 CITY-ST-ZIP CLEARWATER FL 33761

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Barbara Lewis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 1/6/99 DAYTIME PHONE # 727-725-0742

CR2E037 (11/98)

235799-90131-33  
750236

#### Board Members

President:  
Barbara Lewis  
2585 Winding Wood Drive  
Phone: 725-0742  
E-mail: bjlewis@gte.net

Vice President:  
Lynda Potts  
2503 Cypress Bend Drive E.  
Phone: 796-2034  
E-mail: jmpotts@ij.net

Secretary:  
Maryellen Sullivan  
2781 Cottonwood Court  
Phone: 726-8627  
E-mail: phoenix@ij.net

Treasurer:  
Wayne Deckert  
2510 Briarwood Court  
Phone: 797-2078  
E-mail: wdeckert@juno.com

Directors:  
Ted Theryo  
2500 Dogwood Court  
Phone: 724-1939

Christa Smith  
2521 Cypress Bend Drive E.  
Phone: 791-9442  
E-mail: rascas@gte.net

Michelle Opie  
2507 Dogwood Court  
Phone: 725-9914

Crime Watch Coordinator:  
Brooks Davis  
2536 Cypress Bend Drive W.  
Phone: 724-9115  
E-mail: bdavis866@aol.com