


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90077 042 ****61.25

DOCUMENT # 753387 Suffix Name CYPRESS CREEK CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 1407 NE 56TH STREET FORT LAUDERDALE FL 33334 US	Mailing Address 2626 E COMMERCIAL BLVD STE 4 FORT LAUDERDALE FL 33308 US
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1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-2031220	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MANAGEMENT ASSIST, INC. 2626 E COMMERCIAL BLVD STE A FORT LAUDERDALE FL 33308	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	DT <input type="checkbox"/> Delete LESTER, M 1407 NE 56 ST #309 FT. LAUDERDALE FL 33334
TITLE NAME STREET ADDRESS CITY ST ZIP	SD <input type="checkbox"/> Delete SMITH, MELLISA 1407 NE 56 STREET #109 FT. LAUDERDALE FL 33334
TITLE NAME STREET ADDRESS CITY ST ZIP	D <input type="checkbox"/> Delete CONSOLI, SAM PO BOX 2448 POMPANO BEACH FL 33061
TITLE NAME STREET ADDRESS CITY ST ZIP	DV <input type="checkbox"/> Delete SIVERMAN, STUART 1407 NE 36 ST FORT LAUDERDALE FL 33334
TITLE NAME STREET ADDRESS CITY ST ZIP	DP <input type="checkbox"/> Delete HAINLIME, ERIC 1407 NE 56 ST #215 FORT LAUDERDALE FL 33334
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY ST ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition GREVE, NICK 1407 NE 56 ST #301 FT LAUDERDALE FL 33334
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Eric T. Hainling ERIC T. HAINLING, PRES. 4/23/07 9548474806