

FILED
Mar 06, 1999 8:00 am
Secretary of State

03-06-1999 90033 028 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS																																																																																																																																					
DOCUMENT # 753801 1. Corporation Name CYPRESS VILLAGE PROPERTY OWNERS ASSOCIATION, INC																																																																																																																																									
Principal Place of Business 108 Cypress Blvd. West Homosassa, FL 34446			Mailing Address 108 Cypress Blvd. West Homosassa, FL 34446																																																																																																																																						
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip Country 28		3. Date Incorporated or Qualified 08/18/1980 4. FEI Number 59-2441506 Applied For Not Applicable 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees																																																																																																																																					
9. Name and Address of Current Registered Agent Cooley, Russell E. 2 Mastic Court West Homosassa, FL 34446			10. Name and Address of New Registered Agent 81 Name Harvey B. Hoffman 82 Street Address (P.O. Box Number is Not Acceptable) Desktop Data Management 83 7165 International Ct. W 84 City Homosassa FL 85 Zip Code 34446																																																																																																																																						
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 617.0507, Florida Statutes. SIGNATURE <i>Harvey B. Hoffman</i> DATE 3-29-99 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating)																																																																																																																																									
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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 *Russell A. Fee*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-99 **352-382-5927**
Date Daytime Phone #

CR2E037 (11/98)