



**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2008 08:00 A
Secretary of State

DOCUMENT # 756620			
1. Entity Name CYPRESS GREEN HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 1153 MAIN ST SUITE 101 DUNEDIN, FL 34698	Mailing Address 275 RIVIERE ROAD PALM HARBOR, FL 34683		
DO NOT WRITE IN THIS SPACE			
		04132008 No Chg-NP CR2E037 (4/06)	
		4. FEI Number 59-2114867	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent SIEG, WALTER R 275 RIVIERE RD PALM HARBOR, FL 34683		DO NOT WRITE IN THIS SPACE	
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 reconstituting) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		U000000901251 04/29/08-80061-011 61.25	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P FITTS, JOHN 3048 CYPRESS GREEN DRIVE PALM HARBOR, FL 34684		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SIEG, WALTER R 275 RIVIERE ROAD PALM HARBOR, FL 34683		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S GOLDBERG, FLORA 840 GRENOBLE DRIVE PALM HARBOR, FL 34684		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MINER, JOANNA 863 GRENOBLE DRIVE PALM HARBOR, FL 34684		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: <u>Walter R Siegler</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>4/13/08</u> Daytime Phone <u>727-781-7811</u>	