

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 14, 2001 8:00 am
Secretary of State

08-14-2001 90008 048 ****61.25

DOCUMENT # 759608

1. Entity Name

CYPRESS RUN TOWNHOMES CONDOMINIUM ASSOCIATION, I

Principal Place of Business

11670 NW 20 DRIVE
 3111 UNIVERSITY DRIVE, SUITE 601
 CORAL SPRINGS FL 33071
 US

Mailing Address

11670 NW 20 DRIVE
 3111 UNIVERSITY DRIVE, SUITE 601
 CORAL SPRINGS FL 33071
 US

2. Principal Place of Business

11660 NW 20 Drive

Suite, Apt. #, etc.

3. Mailing Address

11660 NW 20 Drive

Suite, Apt. #, etc.

City & State

Coral Springs, FL

City & State

Coral Springs, FL ~~33071~~

4. FEI Number

59-2482901

Applied For

Not Applicable

Zip

33071

Country

U.S.A.

Zip

33071

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GARDNER, JIM
 11662 NW 20TH DRIVE
 CORAL SPRINGS FL 33071

7. Name and Address of New Registered Agent

Name **Al Procopio**

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

11660 NW 20 Drive

City **Coral Springs**

FL

Zip Code
33071

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.

SIGNATURE

Al Procopio

Al Procopio, President

8/6/01

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **GARDNER, JIM**
 STREET ADDRESS **11662 N.W. 20TH DRIVE**
 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **TD** ☐ Delete
 NAME **ANDERSON, SIMONE**
 STREET ADDRESS **11678 N.W. 20TH DRIVE**
 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **VD** ☐ Delete
 NAME **GUERSLEY, GUY M**
 STREET ADDRESS **11672 N.W. 20TH DRIVE**
 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **SD** ☐ Delete
 NAME **JORDAN, CYNTHIA**
 STREET ADDRESS **11684 N.W. 20TH DRIVE**
 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **D** ☐ Delete
 NAME **PASTORINO, MARCELLE**
 STREET ADDRESS **11690 N.W. 20TH DRIVE**
 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **President** ☒ Change ☐ Addition
 NAME **Procopio, Al**
 STREET ADDRESS **11660 NW 20 Drive**
 CITY-ST-ZIP **Coral Springs, FL 33071**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 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:

Al Procopio **Al Procopio, President**

8/6/01 (954) 753-0072

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (5/01)