## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 759837** 

FILED Feb 06, 2009 Secretary of State

Entity Name: CYPRESS BEND RV RESORT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

C/O GULF BREEZE MGMT SVCS OF SW FL, LLC 8910 TERRENE CT STE 200 BONITA SPRINGS, FL 34135

**New Mailing Address: Current Mailing Address:** 

C/O GULF BREEZE MGMT SVCS OF SW FL, LLC 8910 TERRENE CT STE 200 BONITA SPRINGS, FL 34135 US

FEI Number: 59-2223623 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WEIDNER, RALPH L C/O GULF BREEZE MGMT SVCS OF SW FL, LLC 8910 TERRENE CT., STE 200 BONITA SPRINGS, FL 34135 US

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:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete DOWD, JOHN (JACK) A KNEEBONE, RAY Name: Name: 8651 MULLWOOD DRIVE Address: 9592 PEPPERWOOD DRIVE Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928

Title: PD () Delete Title: (X) Change ( ) Addition

MOORE, FRED Name: MOORE, FRED Name:

Address: 20168 CHERRY TREE LANE Address: 20168 CHERRY TREE LANE City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928

Title: () Delete Title: (X) Change ( ) Addition

LAMPHIER, RICHARD LAMPHIER, RICHARD Name: Name: 8691 FIRWOOD DRIVE Address: Address: 8691 FIRWOOD DRIVE City-St-Zip: ESTERO, FL 33928 City-St-Zip: ESTERO, FL 33928

( ) Delete Title: Title: () Change () Addition

HOY, DEAN Name: Name: 8540 FIRWOOD DRIVE Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip:

Title: () Delete Title: () Change () Addition

HERBERT, ROLLO Name: Name: 20196 ORANGE TREE LANE Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN (JACK) A. DOWD **PRES** 02/06/2009