


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90109 048 ****61.25

DOCUMENT # 760314

1. Entity Name
 CYPRESS VILLAGE ONE ASSOCIATION, INC.



Principal Place of Business
 PRESIDENTIAL GROUP SOUTH
 135 W PINEVIEW ST.
 ALTAMONTE SPRINGS, FL 32714

Mailing Address
 PRESIDENTIAL GROUP SOUTH
 135 W PINEVIEW ST.
 ALTAMONTE SPRINGS, FL 32714

14016304



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

01142005 Chg-NP CR2E037 (10/03)

City & State

4. FEI Number
 59-2128872

Applied For
 Not Applicable

City & State

Zip Country Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRESIDENTIAL GROUP SOUTH
 135 W PINEVIEW ST.
 ALTAMONTE SPRINGS, FL 32714

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
 FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DV
 NAME TURNER, DIANA Delete
 STREET ADDRESS 539 MOREE LOOP
 CITY-ST-ZIP WINTER SPRINGS, FL 32708

TITLE ~~D, F~~
 NAME Jane Mackey Change Addition
 STREET ADDRESS 525 Moree Loop
 CITY-ST-ZIP Winter Springs, FL 32708

TITLE PD
 NAME KAISER, VIVIAN Delete
 STREET ADDRESS 527 MOREE LOOP
 CITY-ST-ZIP WINTER SPRINGS, FL 32708

TITLE P, D
 NAME Steve Sovich Change Addition
 STREET ADDRESS 511 Moree Loop
 CITY-ST-ZIP Winter Springs, FL 32708

TITLE D
 NAME LOPEZ, ELAINE Delete
 STREET ADDRESS 515 MOREE LOOP
 CITY-ST-ZIP WINTER SPRINGS, FL 32708

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

TITLE STD
 NAME HYDE, BETHAN Delete
 STREET ADDRESS 531 MOREE LOOP
 CITY-ST-ZIP WINTER SPRINGS, FL 32708

TITLE S, D
 NAME Bethan Hyde Change Addition
 STREET ADDRESS 531 Moree Loop
 CITY-ST-ZIP Winter Springs, FL 32708

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Delete

TITLE VP, D
 NAME Nadine Castro Change Addition
 STREET ADDRESS 523 Moree Loop
 CITY-ST-ZIP Winter Springs, FL 32708

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP Change Addition

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: Jane Mackey 4/27/05 407-327-6308
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #