

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

INCORPORATION  
 MAY 1, 1982  
 1995



STATE OF FLORIDA  
 DEPARTMENT OF REVENUE  
 TALLAHASSEE, FLORIDA

95 MAY -1 0 1995

DOCUMENT # **763663** (2)

**CYPRESS RUN PROPERTY OWNERS' ASSOCIATION, INC.**

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

2669 ST ANDREWS BLVD TARPON SPRINGS FL 34689-6310		2669 ST ANDREWS BLVD TARPON SPRINGS FL 34689-6310		3. Date of Incorporation <b>06/14/1982</b>	3a. Effective Date of Amendment <b>06/07/1994</b>	
21. Principal Office Telephone <b>59-2319765</b>	2a. Mailing Address [ ]	22. Code of Jurisdiction [ ]	27. Mailing Office [ ]	4. Filing Office <b>59-2319765</b>	Applied Fee Not Applicable	
23. State of Origin [ ]	26. Mailing Office [ ]	24. [ ]	29. [ ]	5. Certificate of Status Received [ ]	<b>\$8.75 Additional Fee Required</b>	
25. [ ]	30. [ ]	6. Director's Compensation Expense [ ]		<b>\$5.00 May Be Added to Fees</b>		
9. Name and Address of Current Registered Agent		7. Nonprofit with 80% Exemption Yes [ ] No [ ]				<b>\$68.75 Supplemental Fee Not Required</b>
10. Name and Address of New Registered Agent		8. Does corporation have liability for intangible tax under 215.0000 Florida Statutes [ ] Yes [ ] No <input checked="" type="checkbox"/>				

TANKEL, ROBERT L., ESQ. 1150 CLEVELAND ST. SUITE 420 CLEARWATER FL 33515-6933	81. Name
	82. Agent Appointed by P.O. Box Number or Not Applicable
	83. [ ]
	84. City
	FL 85. Zip Code

11. I, the undersigned, as the authorized officer and agent of the above named corporation, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the corporation has paid the required fee for the appointment of a registered agent. I am a resident of the State of Florida and have been duly qualified to act as a registered agent for the corporation.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS	13. ADDITIONAL OFFICERS AND DIRECTORS
PD NAME: DENYES, RICHARD T ADDRESS: 1007 ROYAL TROON CT. TARPON SPRINGS FL VD NAME: HICKMAN, BILL G ADDRESS: 1049 ROYAL BIRKDALE DR. TARPON SPRINGS FL TD NAME: SPRAGUE, JACK ADDRESS: 623 ROYAL DORNOCH CT. TARPON SPRINGS FL SD NAME: SNELL, MARY E ADDRESS: 8514 RIDGE ROAD NEW PORT RICHEY FL D NAME: SCHMITZ, ROY ADDRESS: 2601 LIVERPOOL DRIVE TARPON SPRINGS FL	PD <input checked="" type="checkbox"/> <input type="checkbox"/> Add'l NAME: HICKMAN, BILL G. ADDRESS: 1049 ROYAL BIRKDALE DR. TARPON SPRINGS, FL 34689 VD <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Add'l NAME: UNICE, T. R. ADDRESS: 853 ROYAL BIRKDALE DR. TARPON SPRINGS, FL 34689 TD <input type="checkbox"/> <input type="checkbox"/> Add'l NAME: SPRAGUE, JACK ADDRESS: 623 ROYAL DORNOCH CT. TARPON SPRINGS, FL 34689 SD <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Add'l NAME: JAIN, NARESH ADDRESS: 2797 ST. ANDREWS BLVD. TARPON SPRINGS, FL 34689 [ ] <input type="checkbox"/> <input type="checkbox"/> Add'l [ ] <input type="checkbox"/> <input type="checkbox"/> Add'l

14. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the corporation has paid the required fee for the appointment of a registered agent. I am a resident of the State of Florida and have been duly qualified to act as a registered agent for the corporation.

SIGNATURE: *Naresh Jain* Naresh Jain 4-26-95 (813) 938-3774  
 SECRETARY