

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90051 037 ****61.25

DOCUMENT # 766015	
1. Entity Name CYPRESS BEND CONDOMINIUM IV ASSOCIATION, INC.	

Principal Place of Business 3500 GATEWAY DR #202 POMPAHO BEACH FL 33069 US	Mailing Address 3500 GATEWAY DR #202 POMPAHO BEACH FL 33069 US
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DLUG



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent CHERYL J. LEVIN, P.A. COURTYARD BUSINESS CENTER 4694 NW 103RD AVENUE SUNRISE FL 33351-7970	
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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

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 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT ENGLESON, ROBERT 3500 GATEWAY DR, @202 POMPAHO BEACH FL 33069 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President-Treasurer ☒ Change ☒ Addition James Mahan 2216 Cypress Bend Dr #510 Pompano Beach, FL 33069
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FICARAB, KENT 3500 GATEWAY DR., #202 POMPAHO BEACH FL 33069 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Maureen Connors 2104 Cypress Bend Dr. #509 Pompano Beach FL 33069 ☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSIN, JAMES 3500 GATEWAY DR., #202 POMPAHO BEACH FL 33069 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KONOPKA, LINDA 3500 GATEWAY DR., #202 POMPAHO BEACH FL 33069 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Patricia Lewis - Director ☐ Change ☐ Addition 2108 Cypress Bend Dr. #208 Pompano Beach FL 33069
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KONOPKA, RON 3500 GATEWAY DR #202 POMPAHO BEACH FL 33069 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director ☐ Change ☐ Addition Tara Hopper 2104 Cypress Bend Dr #109 Pompano Beach FL 33069
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 exemptions contained in Section 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:

[Signature]

2/8/06 954-968-0004