2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State
04-16-2007 90051 003 ****61.25

DOCUMENT # 766015

1. Entity Name
CYPRESS BEND CONDOMINIUM IV ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5300 POWERLINE ROAD 200-A FT. LAUDERDALE, FL 33309 US	5300 POWERLINE ROAD 200-A FT. LAUDERDALE, FL 33309 US

02222007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
7300 W McNab	7300 W McNab
Suite, Apt. #, etc.: 220	Suite, Apt. #, etc.: 220
City & State: Tamarac, FL.	City & State: Tamarac FL
Zip: 33321 Country: Broward	Zip: 33321 Country: Broward

4. FEI Number 59-2349683 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MEYROWITZ, ANDY
90 DCI ASSOCIATION SERVICES
2035 HARDING STREET, SUITE 200
HOLLYWOOD, FL 33020

7. Name and Address of New Registered Agent

Name: D & B Prop. Mgt. Svcs.
Street Address (P.O. Box Number is Not Acceptable): 7300 W McNab #220
City: Tamarac FL Zip Code: 33321

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: _____ 3/16/07
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	V MAHAR, JAMES 2216 CYPRESS BEND DR. #510 POMPANO BEACH, FL 33069	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Sandra Hickox 2215 N. Cypress Bend Dr #203	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S FLORESTAL, TCHARLY 2108 S CYPRESS BEND DRIVE; #301 POMPANO BEACH, FL 33069	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Francis Lyons 2104 S. Cypress Bend Dr. #505	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WEBB, DAVID 2106 S CYPRESS BEND DRIVE, #508 POMPANO BEACH, FL 33069	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~P~~ VP INDEN, ESTELLE 2108 S CYPRESS BEND DRIVE, #307 POMPANO BEACH, FL 33069	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOPPER, TARA 2104 CYPRESS BEND DR. #109 POMPANO BEACH, FL 33069	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LACROCE, GREGORY 2106 S CYPRESS BEND DRIVE, #509 POMPANO BEACH, FL 33069	☐ 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 Chapter 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: David Webb 4-4-2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

David Webb- President