2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766015

FILED Mar 25, 2009 Secretary of State

Entity Name: CYPRESS BEND CONDOMINIUM IV ASSOCIATION, INC.

| Current Principal Place of Business: | | | | New Prin | New Principal Place of Business: | | |
|--|---|------------------------|------------------------|---|---|--|--|
| 10191 W S | PROPERTY SAMPLE RD: PRINGS, FL | 203 | US | | | | |
| Current Mailing Address: | | | | New Mai | New Mailing Address: | | |
| 10191 W S | PROPERTY SAMPLE RD: PRINGS, FL | 203 | US | | | | |
| FEI Number | r: 59-2349683 | FEIN | Number Applied For () | FEI Number Not Ap | plicable () Certificate of Status Desired () | | |
| Name and | d Address of | Curren | t Registered Agent: | Name an | d Address of New Registered Agent: | | |
| C/O J 7 L 10191 W S POMPANO The above | AZZO, JAMES PROPERTY I SAMPLE RD O BEACH, FL e named entity te of Florida. | MGMT 203 . 33065 | | C/O J & L 10191 W CORAL S | AZZO, JAMES . PROPERTY MGMT SAMPLE RD 203 SPRINGS, FL 33065 US ı its registered office or registered agent, or bo | | |
| SIGNATURE: | | | | | 03/25/2009 | | |
| 0.014/ (10 | | onic Sigi | nature of Registered. | Agent | Date | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIO | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR | | |
| Title: Name: Address: City-St-Zip: | D (HICKOX, SAN 2216 N. CYP POMPANO B | RESS BEI | ND #203 | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | FLORESTAL, | RESS BEN | Y ND DRIVE, #301 | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | WEBB, DAVII | RESS BEN | ND DRIVE, #508 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | | |
| Title: Name: Address: City-St-Zip: | INDEN, ESTE | RESS BEN | ND DRIVE, #307 | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | D (HOPPER, TA 2104 CYPRE POMPANO B | SS BEND | DR. #109 | Title: Name: Address: City-St-Zip: | D (X) Change () Addition LYONS, FRANK 2104 S CYPRESS BEND DR. #505 POMPANO BEACH, FL 33069 | | |
| Title: Name: Address: | LACROCE, G | | | Title: Name: Address: City-St-Zip: | () Change () Addition | | |

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: JAMES CALDERAZZO RA 03/25/2009