2004 NOT-EOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 26, 2004 8:00 am Secretary of State **DOCUMENT # 766070** 1. Entity Name 02-26-2004 90005 049 ****61.25 CYPRESSVIEW PROPERTY OWNERS' ASSOCIATION, Principal Place of Business Mailing Address P O BOX 5324 P O BOX 5324 SUN CITY CENTER FL 33571-5324 SUN CITY CENTER FL 33571-5324 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-2262425 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LINSKY, MARK Street Address (P.O. Box Number is Not Acceptable) 1509 SUN CITY CENTER PLAZA SUN CITY CENTER FL 33570 City 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 DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Florida Department of State Trust Fund Contribution. Due By May 1, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete TITLE TITLE ☐ Change Addition YOUNG, RICHARD ZIMMER, JACK NAME NAME 1704 AURA COURT 1607 COMFY COURT STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-7IP SUN CITY CENTER, FL 33573 VD RAYMOND, JOSEPH Delete Addition TITLE TITLE Change Change KAMM, RICHARD NAME NAME 1709 AURA COURT 1724 ATRIUM DRIVE STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIE CITY-ST-ZIP SUN CITY COUTER, FL 33573 STD ☐ Delete TITLE TITLE Change ☐ Addition MOGIL, BERNARD ... NAME NAME 1617 COMFY COURT STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-ZIP D. Stranger Delete TITLE TITLE ☐ Change Addition QUINN, DONALD CREMINER, GEORGE NAME NAME 1606 COMFY CT 1704 ATRIUM DRIVE STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-ZIP SUN CITY CENTER ☐ Change Addition TITLE ☐ Delete TITLE FINLEY, MARTHA NAME NAME 1605 COMFY COURT STREET ADDRESS STREET ADDRESS SUN CITY CENTER FL 33573 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

CITY-ST-ZIP

BERNARD W. MOGIL AME OF SIGNING OFFICER OR DIRECTOR

FILED