

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766987

FILED
Mar 22, 2005
Secretary of State

Entity Name: CYRC MASTER ASSOCIATION, INC.

Current Principal Place of Business:

9854 CALOOSA YACHT & RACQUET CLUB DR
FT. MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

% BENSON'S, INC.
12650 WHITEHALL DRIVE
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 65-0018209 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENSON, MARK R
12650 WHITEHALL DRIVE
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHMIDT, WILLIAM T JR
Address: 9811 ENSIGN CT
City-St-Zip: FT. MYERS, FL 33919

Title: D () Delete
Name: BRADLEY, MARGUERITE
Address: 9920 CY&R CLUB DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: STD () Delete
Name: FRELING, MARTIN
Address: 9740 MAINSAIL CT
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: STAHLHUT, LINDA
Address: 12530 MARINA CLUB DR
City-St-Zip: FORT MYERS, FL 33919

Title: VD () Delete
Name: WITZBERGER, JAMES
Address: 9639 HALYARDS CT #11
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: ORR, BARBARA
Address: 9595 HALYARDS CT #21
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM SCHMITT

Electronic Signature of Signing Officer or Director

PRES

03/22/2005

_____ Date