

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769885

FILED
Apr 26, 2008
Secretary of State

Entity Name: CYPRESS CREEK OFFICE & INDUSTRIAL PARK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

825 NW 61ST STREET
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

825 NW 61ST STREET
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 59-2340203

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUPPE, JAMES
825 N.W. 61ST ST.
FT. LAUDERDALE, FL 33309 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: STD () Delete
Name: SUPPE, ANN
Address: 825 NW 61 ST
City-St-Zip: FT. LAUDERDALE, FL

Title: D () Delete
Name: SUPPE, JAMES,
Address: 825 NW 61ST ST.
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D (X) Delete
Name: MYERS, KIMBERLY
Address: 877 NW 61 ST
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: PD () Delete
Name: BERRY, ANDREW
Address: 610 POWERLINE ROAD
City-St-Zip: FORT LAUDERDALE, FL 33309

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:

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 SUPPE

D

04/26/2008

Electronic Signature of Signing Officer or Director

Date