


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


FILED
May 03, 2007 08:00 A
Secretary of State

DOCUMENT # N00000000327
 1. Entity Name
THE FRIENDS OF CYPRESS GROVE PARK, INC.



Principal Place of Business Mailing Address
228 DOOLITTLE STREET **228 DOOLITTLE STREET**
ORLANDO, FL 32839 **ORLANDO, FL 32839**

DO NOT WRITE IN THIS SPACE



04282007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3626050	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILKINS, ROBERT C JR.
230 LOOKOUT PLACE
MAITLAND, FL 32751

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

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE CD	CLICK, DORIS
NAME	228 DOOLITTLE ST.
STREET ADDRESS	ORLANDO, FL 32839
CITY - ST - ZIP	
TITLE D	WORTHEN, JAMES
NAME	4655 CASA GRANDE CT.
STREET ADDRESS	ORLANDO, FL 32839
CITY - ST - ZIP	
TITLE STD	LEE, CHARLES J
NAME	1123 HOLDEN AVE.
STREET ADDRESS	ORLANDO, FL 32839
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 05/25/07-80005-017 61.25

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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: Charles J. Lee **CHARLES J. LEE** 4-25-2007 407-859-9228
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #