

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005609

FILED
Apr 06, 2006
Secretary of State

Entity Name: CYPRESS COVE ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2895 GREY OAKS BLVD
TARPON SPRINGS, FL 34689

New Principal Place of Business:

3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683

Current Mailing Address:

2895 GREY OAKS BLVD
TARPON SPRINGS, FL 34689

New Mailing Address:

3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683

FEI Number: 59-3666496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON, ROGER A ESQ
911 CHESTNUT STREE
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

MELROSE MANAGEMENT GROUP
3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683 US

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: JACK B HANSON

04/06/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: GENDEBIEN, JEAN
Address: 2895 GREY OAKS BLVD
City-St-Zip: TARPON SPRINGS, FL 34689

Title: DP () Delete
Name: ARNOLD, PAUL
Address: 990 CYPRESS COVE WAY
City-St-Zip: TARPON SPRINGS, FL 34688

Title: DS () Delete
Name: CURRAN, THOMAS
Address: 884 CYPRESS COVE WAY
City-St-Zip: TARPON SPRINGS, FL 34688

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARNOLD, MARY JO
Address: 990 CYPRESS COVE WAY
City-St-Zip: TARPON SPRINGS, FL 34689

Title: T (X) Change () Addition
Name: CURRAN, TOM
Address: 884 CYPRESS COVE WAY
City-St-Zip: TARPON SPRINGS, FL 34689

Title: S (X) Change () Addition
Name: MARCANTONIO, LAWRENCE
Address: 928 CYPRESS COVE WAY
City-St-Zip: TARPON SPRINGS, FL 34689

I hereby certify that the information supplied with this filing does not qualify for the 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: JACK B HANSON

AGEN

04/06/2006

Electronic Signature of Signing Officer or Director

Date