

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007949

FILED  
Apr 01, 2008  
Secretary of State

Entity Name: CYPRESS LAKES COMMUNITY ASSOCIATION, INC.

## Current Principal Place of Business:

1750 W BROADWAY ST  
118  
OVIEDO, FL 32765

## New Principal Place of Business:

5955 T G LEE BLVD  
300  
ORLANDO, FL 32822

## Current Mailing Address:

1750 W BROADWAY ST  
118  
OVIEDO, FL 32765

## New Mailing Address:

5955 T G LEE BLVD  
300  
ORLANDO, FL 32822

FEI Number: 65-1133831

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

LELAND MANAGEMENT INC.  
5955 T G LEE BLVD  
300  
ORLANDO, FL 32822 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: REBECCA FURLOW

04/01/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: JERMAN, RICHARD  
Address: 1750 W BROADWAY ST, #118  
City-St-Zip: OVIEDO, FL 32765

Title: VSD ( ) Delete  
Name: KOSOY, BRIAN D  
Address: ONE NORH CLEMATIS STREET SUITE 305  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: TD ( ) Delete  
Name: COSTELLO, VINCENT  
Address: ONE NORH CLEMATIS STREET SUITE 305  
City-St-Zip: WEST PALM BEACH, FL 33401

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change (X) Addition  
Name: ~~MOORE, REBECCA~~  
Address: ~~2700 DARK ISLAND BLVD~~ 2700 DARK ISLAND BLVD COURT  
City-St-Zip: ORLANDO, FL 32820 US

Title: ~~VPD~~ (X) Change (X) Addition  
Name: ~~BRIAN D KOSOY~~  
Address: ~~2000 RICHMOND GARDEN DRIVE~~  
City-St-Zip: ORLANDO, FL 32820 US

Title: BD (X) Change (X) Addition  
Name: ~~REBECCA MOORE~~  
Address: ~~1850 BAYVIEW DR~~  
City-St-Zip: ORLANDO, FL 32820 US

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: CHERYL MOORE

PD

04/01/2008

Electronic Signature of Signing Officer or Director

Date