## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # N0100000778

## CYPRESS LAKES MANOR SOUTH CONDOMINIUM ASSOCIATIO



**FILED** Jan 24, 2003 8:00 am Secretary of State
01-24-2003 90067 049 \*\*\*\*61.25

N, INC.			1					
Principal Plac	e of Business	Mailing Address	- <del></del>		1			
8771 ROSE CT FT MYERS FL 33919		8771 ROSE CT FT MYERS FL 33919			 			
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2. Principal P	Place of Business	3. Mailing Address	<u>.</u>					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			CHECK HERE IE MAKING CHANGES			
City & State		City & State			4. FEI Number 65-1082059			<del></del>
Zip	Country	Zip	Country		5. Certificate of St	atus Desired		
	6. Name and Address of Current	Registered Agent	<u> </u>		7. Name and Add	ress of New Register	<del></del>	
			Nai	me	<del></del>	<del></del>		
SHIELDS, 1833 HEM	, CHRISTOPHER J JORY ST		Stre	eet Address (	(P.O. Box Number is Not Acceptable)			
1	S FL 33901	_						
		·	City	y			Zip Cod	e
8. The above	named entity submits this statement for	or the ourpose of changing its	registered offi	ce or register	red agent or both in		<u> </u>	and accept
	ions of registered agent.	, the purpose of changing the	registored on	oc or regioner	co agoni, or boin, in	ine otato or rionda.	ziii idii imai iii ii	and dosopt
					The Hequired  7. Name and Address of New Registered Agent  ddress (P.O. Box Number is Not Acceptable)  FL Zip Code  registered agent, or both, in the State of Florida. I am familiar with, and accept  ure required when reinstating)  DATE  \$5.00 May Be Added to Fees  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Change Addition  RAHALO RITERSUR  QT81 LUCLE 14.  LIPERSUR  DARLENE LE TERBERD D. Change Addition  Change Addition			
SIGNATURE .	Signature, typed or printed name of registered agent	t and title if applicable. (NOT	E: Registered Agent	signature required	d when reinstating)	DA	re	<del></del>
			Applied Formation of Country  5. Certificate of Status Desired  Street Address (P.O. Box Number 65-1082059  City  FL  Zip Code  Se of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept of Country.  Size address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  Se of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept of Country.  Size and Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  Se of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept of Country.  Size and Contribution.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Delete  TILE  ROWALD RIFE SOUR  STREET ADDRESS OFFI STATE OUT.  STREET ADDRESS OUT. STATE OUT.  STREET ADDR					
ı	FILE NOW: FEE IS \$61.25							
		irust Fund C	ontribution.	ы	Added to Fees	Florida Dep	partment of \$	State
10.	OFFICERS AND DI	RECTORS .	11.		ADDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN	110
TITLE	D	☐ Delete	TITLE				Change	Addition
NAME STREET ADDRESS	GRANNIS, THOMAS		1	ncce Rah	1ALD RITE	2 K & C B .   < 1 A .		
CITY-ST-ZIP	8731 ROSE COURT FT MYERS FL 33919			ness 7	HXPhL	61. 320,0	,	
TITLE	P	☐ Delete		0	VICE CHA	11. 17119	Change	
NAME	LEMLEY, JACK	- Delote		DAI	riene 1d	Eit IT	ووالمالة وعر	
STREET ADDRESS	1505 MYERLEE COUNTRY CLUB	BLVD V-4	•	RESS 87.	51 Pio 30	ct	معاليك فيبيهم واليد	, -
CITY-ST-ZIP	FT MYERS FL 33919		CITY-ST-ZiP	FF.	Myers.	Fl. 33919	<del></del> _	
TITLE	D	☐ Delete		Due	MLP TL	R BRDDT.	Change	Addition
NAME STREET ADDRESS	COASH, RONALD 8751 ROSE COURT			0000 / 7	61. PANTE	r 20		
CITY-ST-ZIP	FT MYERS FL 33919	,	•	1/4	MUDAR	F1 33910		
TITLE	D	₹ <b>6</b> Delete	<del></del>	$-\frac{1}{n}$	· myerry	11: 22117	□ Change	Addition
NAME	ALEXANDER, CONSTANTINE	<b>y</b> D01010	1	PAT	TTI MARY	HALL.		
STREET ADDRESS	1505 MYERLEE COUNTRY CLUB	BLVD V-4	STREET ADDR	RESS 67	TO WINK	ier Ro.		
CITY-ST-ZIP	FT MYERS FL 33919		CITY-ST-ZIP	PH	MYERG	1.339	15	
TITLE	D	🛣 Delete	TITLE Ø	WM	. FOLRY		☐ Change	☐ Addition
NAME STREET ADDRESS	LINDBERG, HARVEY			67	yo Winst	KZKR KD.		ı
STREET ADDRESS CITY-ST-ZIP	6761 PANTHER LANE T-5		•	IESS F.	MUPLE	11 4300	<u>~3</u>	
TITLE	FT MYERS FL 33919	M raina		-+'-	111/1009	11. 11/1		- Addition
NAME	GARRY, JEAN	JZ3 ∪elete		- }			☐ Citalige	
STREET ADDRESS	6741 PANTER LANE			RESS				ľ
CITY-ST-ZIP	FT MYERS FL 33919		CITY-ST-ZIP					}

12. I hereby certify that the information supplied with this filing does not qualify 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 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 addryss, with all other like empowered.

SIGNATURE: