2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2012
Secretary of State

DOCUMENT# N01000001326

Entity Name: CYPRESS LOOP VILLAGE OF HERITAGE SPRINGS, INC.

Current Principal Place of Business:

40347 US 19 NORTH
STE 229
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

40347 US 19 NORTH
STE 229
TARPON SPRINGS, FL 34689

New Mailing Address:

FEI Number: 59-3741544 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CITADEL PROP MGMT GRP INC
40347 US 19 NORTH,SUITE #229
TARPON SPRINGS, FL 34689 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: D
Name: LEMASTER, JIM
Address: 40347 US 19 N, STE 229
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: PD
Name: PINER, ANITA
Address: 40347 US 19 N, STE 229
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: D
Name: BECKER, RON
Address: 40347 US 19 N, STE 229
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: D
Name: HARMAN, DOUG
Address: 40347 US 19 N, STE 229
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: STD
Name: FRONTZ, KATHLEEN
Address: 40347 US 19 N, STE 229
City-St-Zip: TARPON SPRINGS, FL 34689 US

I hereby 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 all other like empowered.

SIGNATURE: JAMES J RANALLO AGNT 04/12/2012

Electronic Signature of Signing Officer or Director — Date