

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002522

FILED  
Feb 24, 2012  
Secretary of State

**Entity Name:** CYPRESS LAKES PRESERVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

10145 CYPRESS LAKE PRESERVE DR..  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

3461-B FAIRLANE FARMS ROAD  
WELLINGTON, FL 33414

**Current Mailing Address:**

THE CONTIENTAL GROUP INC  
3461B FAIRLANE FARMS ROAD  
WELLINGTON, FL 33414

**New Mailing Address:**

3461-B FAIRLANE FARMS ROAD  
WELLINGTON, FL 33414

FEI Number: 06-1693804

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HILLEY & WYANT-CORTEZ-P.A.  
860 US HIGHWAY ONE  
SUITE 108  
NORTH PALM BEACH, FL 33408 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: PD  
Name: LAUREL, CRAIG  
Address: 10600 CYPRESS LAKES PRESERVE DR  
City-St-Zip: LAKE WORTH, FL 33467

Title: VPD  
Name: RUDY, JAMES  
Address: 10352 CYPRESS LAKES PRESERVE DR  
City-St-Zip: LAKE WORTH, FL 33467

Title: STD  
Name: BIRO, JASON  
Address: 10639 CYPRESS LAKES PRESERVE DR  
City-St-Zip: LAKE WORTH, FL 33467

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: LAUREL CRAIG

PRES

02/24/2012

Electronic Signature of Signing Officer or Director

Date