2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# N01000004155

Entity Name: CYPRESS PALM GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

331 SOUTH 12TH ST.
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

331 SOUTH 12TH ST.
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 59-3755403 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMMONS, EVETT L ESQ.
145 NW CENTRAL PARK PLAZA
SUITE 200
PORT ST. LUCIE, FL 34986 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 ( ) Delete
Name: THOMPSON, GEORGE E
Address: 331 SOUTH 12TH STREET
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VD ( ) Delete
Name: THOMPSON, MARY E
Address: 331 SOUTH 12TH STREET
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: SD ( ) Delete
Name: MORRIS, PAULA E
Address: 1204 FIR STREET
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: TD ( ) Delete
Name: MITCHELL, VELMA D
Address: POST OFFICE BOX 373
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: PAULA E MORRIS SD 04/30/2006

Electronic Signature of Signing Officer or Director — Date