2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N01000005819

FILED Jun 29, 2005 Secretary of State

Entity Name: CYPRESS COVE B AT GRANDEZZA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: % GULF BREEZE MGMT. SRVCS. OF SW FL, LLC SEADALE COURT 27725 OLD 41, STE 104 ESTERO, FL 33928 BONITA SPRINGS, FL 34135 New Mailing Address: **Current Mailing Address:** % GULF BREEZE MGMT. SRVCS. OF SW FL, LLC C/O PROFESSIONAL COMMUNITY SERVICE 27725 OLD 41, STE 104 PO BOX 110156 BONITA SPRINGS, FL 34135 NAPLES, FL 34108 FEI Number: 59-3737686 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: WHITE, WILLIAM D 2310 DELLA DR NAPLES, FL 34117 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete () Change () Addition MINUTELLA, JOSEPH Name: Name: 20137 SEA DALE CT Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: () Delete Title: () Change () Addition WHEELER, NORBERT A Name: Name: Address: 20043 SEADALE COURT Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: Title: () Change () Addition () Delete RICE, NANCY Name: Name: 20061 SEA DALE CT Address: Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: DS () Delete Title: () Change () Addition Name: CARPER, TERRY Name: Address: 20124 SEADALE CT Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: () Delete Title: MAS (X) Change () Addition WHITE, WILLIAM D Name: BETTINA, MAYHNAGI Name: 171 COMMERCIAL BLVD STE 20 171 COMMERCIAL BLVD STE 20 Address: Address: City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34104 Title: () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: WILLIAM .D. WHITE AS 06/29/2005

DUNKLE BOB

20130 SEADALE CT

ESTERO, FL 33928

Name:

Address:

City-St-Zip: