2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 01, 2008 8:00 am Secretary of State

04-01-2008 90007 020 ****61.25

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1. Entity Name CYPRESS STRAND CONDOMINIUM ASSOCIATION, INC.



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|---|---|---|---|--|---|--|--|--|--|--|
| Principal Place of Business PROGRESSIVE COMMUNITY MGMT, INC. 1801 GLENGARY STREET SARASOTA, FL 34231 | | Mailing Address PROGRESSIVE COMMUNI 1801 GLENGARY STREET SARASOTA, FL 34231 | | 40 | 9 0 0 ~ - | | | | | |
| SHICKSUTA, F | L 34231 | SARASUIA, FL 34251 | | | | | | | | |
| 2. Principal P | face of Business - No P.O. Box # | 3. Mailing Address | | | | | | | | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 0124200 | 8 Chg-NP | CR2E037 (12/06 |) | | | |
| City & State | 8 | City & State | | 4. FEI Nui 35-2 | nber 209926 |) + | Applied For Not Applicable | | | |
| Zip | Country | Zip | Country | 5. Certific | ate of Status Desired | □ \$8.75 A | | | | |
| 6. Name and Address of Current | | Registered Agent | | 7. Name a | 7. Name and Address of New Registered Agent | | | | | |
| PPACPE | SSIVE COMMUNITY MANAGE | MENT INC | Name | | | | | | | |
| 1801 GLEI | NGARY STREET A, FL 34231 | | Street A | ddress (P.O. Box Nu | nber is Not Acceptab | ele) | | | | |
| | | | | | | | | | | |
| | | | City | | | FL Zip C | ode | | | |
| | named entity submits this statement for ions of registered agent. | r the purpose of changing its re | gistered office or | registered agent, or | both, in the State of F | lorida. I am familiar wit | h, and accept | | | |
| vio obligat | ons or registered agent. | | | | | | | | | |
| SIGNATURE . | Signature, typed or printed name of registered agent | the Hamiltonia (NOTE) | | | | 0.455 | | | | |
| | Signature, typed or printed harre or registered agent | and title if applicable. (NO(E:) | registered Agent Bignazi | ine required when reinstating | | DATE | | | | |
| | | | | | | | | | | |
| | Filing.Fee is \$61.25 Due by May 1, 2008 | 9. Election Camp Trust Fund Co | | \$5.00 Ma Added to Fe | , o | Make check payable orida Department of | | | | |
| 10. | OFFICERS AND DIS | Trust Fund Co | | Added to Fe | es Fk | | State | | | |
| TITLE | OFFICERS AND DIE | Trust Fund Co | 11. | ADDITIONS/ | CHANGES TO OFFIC | ERS AND DIRECTORS | State IN 10 | | | |
| | OFFICERS AND DIS | Trust Fund Co | ntribution. | ADDITIONS/ | CHANGES TO OFFIC | ERS AND DIRECTORS | State IN 10 | | | |
| TITLE NAME | OFFICERS AND DIE PD THORSON, RICHARD | Trust Fund Co | 11. TITLE NAME | ADDITIONS/ PD WEST, IR. 7009 SCR | CHANGES TO OFFICE WILLIAM UB JAY | ERS AND DIRECTORS Change | State IN 10 | | | |
| TITLE NAME STREET ADDRESS | Due by May 1, 2008 OFFICERS AND DIF PD THORSON, RICHARD 7074 STRAND CIRCLE BRADENTON, FL 34203 D | Trust Fund Co | TITLE NAME STREET ADDRESS | ADDITIONS/ PD WEST, IR. 7009 SCR | CHANGES TO OFFIC | ERS AND DIRECTORS Change | State IN 10 Addition | | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Due by May 1, 2008 OFFICERS AND DIF PD THORSON, RICHARD 7074 STRAND CIRCLE BRADENTON, FL 34203 D MAY, JEAN | Trust Fund Co | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | ADDITIONS/ PD WEST, JR. 7009 SCR BRADEN | CHANGES TO OFFICE WILLIAM UB JAY | erida Department of ERS AND DIRECTORS Change M JAY 34203 | State IN 10 Addition | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Due by May 1, 2008 OFFICERS AND DIF PD THORSON, RICHARD 7074 STRAND CIRCLE BRADENTON, FL 34203 D MAY, JEAN 7022 SCRUB JAY WAY | Trust Fund Co | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | ADDITIONS/ PD WEST, JR. 7009 SCR BRADEN | CHANGES TO OFFICE WILLIAM UB JAY | erida Department of ERS AND DIRECTORS Change M JAY 34203 | State IN 10 Addition | | | |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the cereiver 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 address, with an other like empowered.

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/08 941-921-5