

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 19, 2004
Secretary of State**

DOCUMENT# N02000006123

Entity Name: PRESERVE ESTATES AT OLDE CYPRESS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

110 SOUTH MAGNOLIA STE 204
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

PO BOX 1839
TAMPA, FL 33601

New Mailing Address:

FEI Number: 11-3687877 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

VOLPE, MICHAEL J ESQ
C/O ROBINS, KAPLAN, MILLER & CIRESI, LLP
711 FIFTH AVE SOUTH STE 201
NAPLES, FL 34102 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: DPS () Delete
Name: CUSTER, DAVID
Address: 110 SOUTH MAGNOLIA STE 204
City-St-Zip: TAMPA, FL 33606

Title: DVT () Delete
Name: SUAREZ, HENRY
Address: 110 SOUTH MAGNOLIA STE 204
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: VOLPE, MICHAEL J
Address: 711 FIFTH AVE SOUTH STE 201
City-St-Zip: NAPLES, FL 34102

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:

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.

SIGNATURE: HENRY SUAREZ

DVT

04/19/2004

Electronic Signature of Signing Officer or Director

_____ Date