

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02173

FILED
Apr 27, 2006
Secretary of State

Entity Name: CYPRESS PARK OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

3638 SOUTH COUNTY RD
PALM BEACH, FL 33480 US

New Principal Place of Business:

9623 CYPRESS PARK WAY
BOYNTON BEACH, FL 33437 US

Current Mailing Address:

C/O CAS PROPERTY MGMT
951 BROKEN SOUND PKWY # 250
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 59-2457190 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRANKLIN L. FRANK
3401 S. OCEAN BLVD.
HIGHLAND, FL 33487 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: STD () Delete
Name: FRANKLIN, FRANK
Address: 3401 S. OCEAN BLVD.
City-St-Zip: HIGHLAND, FL 33487

Title: D () Delete
Name: FRANK, KENNY
Address: 525B BROADWAY MALL
City-St-Zip: HICKSVILLE, NY 11801

Title: D () Delete
Name: FRANKLIN, GLENN
Address: 525B BROADWAY MALL
City-St-Zip: HICKSVILLE, NY 11801

Title: PD () Delete
Name: WETHERBEE, DOUGLAS
Address: 9627 CYPRESS PARKWAY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: () Delete
Name:
Address:
City-St-Zip:

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: SD (X) Change () Addition
Name: WETHERBEE, DOUGLAS
Address: 9627 CYPRESS PARKWAY
City-St-Zip: BOYNTON BEACH, FL 33437

Title: PD () Change (X) Addition
Name: CAGGIANO, DOROTHY
Address: 9529 CYPRESS PARKWAY
City-St-Zip: BOYNTON BEACH, FL 33437

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: KEN FRANK

D

04/27/2006

Electronic Signature of Signing Officer or Director

Date