

2007 NOT-FOR-PROFIT CORP C RATION ANNUAL REPORT (AR)

FILED
Mar 08, 2007 8:00 am
Secretary of State

03-08-2007 90018 030 ****61.25

DOCUMENT # N03000003850

1. Entity Name

CYPRESS LAKE OFFICE CENTER ASSOCIATION, INC.



Principal Place of Business

9250 CORKSCREW ROAD
#8
ESTERO FL 33928

Mailing Address

9250 CORKSCREW ROAD
#8
ESTERO FL 33928



2. Principal Place of Business - No P.O. Box #

12811 Kenwood Lane

Suite, Apt. #, etc.

Suite 115

City & State

Fort Myers, FL

Zip
33907

Country
Lee

3. Mailing Address

12811 Kenwood Lane

Suite, Apt. #, etc.

Suite 115

City & State

Fort Myers, FL

Zip
33907

Country
Lee

1st MOORE

CR2E037 (10/06)

4. FEI Number

20-2417382

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

COSTELLO, TRUMAN J
12670 NEW BRITTANY BLVD
SUITE 101
FT. MYERS FL 33907

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DS	<input checked="" type="checkbox"/> Delete
NAME	MINAHAN, ROBERT A	
STREET ADDRESS	9250 CORKSCREW ROAD #8	
CITY - ST - ZIP	ESTERO FL 33928	

TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	MILLER, STEPHANIE	
STREET ADDRESS	9250 CORKSCREW ROAD #8	
CITY - ST - ZIP	ESTERO FL 33928	

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FREUND, RICHARD	
STREET ADDRESS	9250 CORKSCREW ROAD #8	
CITY - ST - ZIP	ESTERO FL 33928	

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GRUMBAGH, PAUL G	
STREET ADDRESS	9411 CYPRESS LAKE DR.	
CITY - ST - ZIP	FT. MYERS FL 33907	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stephen Prendiville MD	
STREET ADDRESS	9407 Cypress Lake Dr.	
CITY - ST - ZIP	Fort Myers, FL 33919	

TITLE	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Will Hutt	
STREET ADDRESS	9403 Cypress Lake Dr. #1	
CITY - ST - ZIP	Fort Myers, FL 33919	

TITLE	DST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Paul Grumbach, DDS	
STREET ADDRESS	9411 Cypress Lake Dr.	
CITY - ST - ZIP	Fort Myers, FL 33919	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 receiver 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 all other like empowered.

SIGNATURE:

Stephen Prendiville, Pres

239.275-7799

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #