2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2011
Secretary of State

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Entity Name: CYPRESS RIDGE EAST PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

115 EAST NEW HAVEN AVE
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

ATTN: RICK WAGNER, SECRETARY
115 EAST NEW HAVEN AVE
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 54-2136060 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WAGNER, RICK
115 EAST NEW HAVEN AVE
MELBOURNE, FL 32901 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: DP
Name: WAGNER, RICK
Address: 1451 ANGLERS DR NE
City-St-Zip: PALM BAY, FL 32905

Title: DVP
Name: FOLEY, DONALD
Address: 3851 ATLANTIC RIDGE LANE
City-St-Zip: GRANT, FL 32949

Title: DS
Name: WAGNER, FRAN
Address: 1451 ANGLERS DR NE
City-St-Zip: PALM BAY, FL 32951

Title: DT
Name: FOLEY, STRAWBERRI
Address: 3851 ATLANTIC RIDGE LANE
City-St-Zip: GRANT, FL 32949

Title: D
Name: CAMERON, GARY
Address: 3890 ATLANTIC RIDGE LANE
City-St-Zip: GRANT, FL 32949

Title: D
Name: FREEMAN, FRED
Address: 2369 BROOKSIDE DR
City-St-Zip: INDIALANTIC, FL 32903

I hereby 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 all other like empowered.

SIGNATURE: STRAWBERRI FOLEY DT 03/10/2011

Electronic Signature of Signing Officer or Director — Date