2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# N03718

Entity Name: CYPRESS COVE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

522 ISLANDER DR.
P.O. BOX 957
SAN MATEO, FL 321870957

New Principal Place of Business:

110 ROSS RD.
SATSUMA, FL 32189

Current Mailing Address:

522 ISLANDER DR.
P.O. BOX 957
SAN MATEO, FL 321870957

New Mailing Address:

110 ROSS RD.
SATSUMA, FL 32189

FEI Number: 59-2516993 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUIRK, WILLIAM J.
226 S. MAIN ST
GAINESVILLE, FL 32601 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: PD ( ) Delete
Name: JACKSON, DONALD F
Address: 778 RIDGEKAND RD
City-St-Zip: SATSUMA, FL 32189

Title: VPD ( ) Delete
Name: KNIGHT, JEFFERY E
Address: 701 CARLON ROAD
City-St-Zip: SATSUMA, FL 32189

Title: SD ( ) Delete
Name: GREEN, THOMAS D.
Address: 106 ISLANDER LANE
City-St-Zip: SAN MATEO, FL

Title: TD ( ) Delete
Name: ROSS, JERRY R
Address: 121 ISLANDER LANE
City-St-Zip: SATSUMA, FL 32189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: JACKSON, DONALD F
Address: 778 RIDGELAND RD
City-St-Zip: SATSUMA, FL 32189

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: ROBERTS, LINDA D
Address: 110 ROSS RD.
City-St-Zip: SATSUMA, FL 32189

I hereby certify that the information supplied with this filing does not qualify 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: LINDA D. ROBERTS TD 04/07/2009

Electronic Signature of Signing Officer or Director — Date