

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90264 039 ****61.25

DOCUMENT # N04000005720 1. Entity Name CYPRESS SPRINGS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 110 S 2ND ST FORT PIERCE, FL 34950			Mailing Address 110 S 2ND ST FORT PIERCE, FL 34950		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-1854642	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CASALINO, GREGG M ESQ 3111 CARDINAL DR VERO BEACH, FL 32963			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					
Filing 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HENRIQUEZ, LEOPOLDO ☐ Delete 110 SOUTH 2ND STREET FORT PIERCE, FL 34950		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GALEGO, KENDAHL ☐ Delete 110 S 2ND ST FORT PIERCE, FL 34950		TITLE NAME STREET ADDRESS CITY-ST-ZIP	To Galego, Kendahl ☒ Change ☐ Addition 110 S. 2nd St. Fort Pierce, FL 34950	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ☒ Delete BELL, RONALD 110 SOUTH 2ND STREET FORT PIERCE, FL 34950		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ☐ Change ☒ Addition Crook, Geoffrey 100 Colibri Way, #101 Melbourne, FL 32901	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Kendahl Galego</u> Kendahl Galego 4-19-07 (321) 777-5552 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					