2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000079

Apr 11, 2011 Secretary of State

Entity Name: CYPRESS LAKES PROFESSIONAL CENTER COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

 200 N PINE AVE
 180 PINE AVE N

 OLDSMAR, FL 34677
 OLDSMAR, FL 34677

Current Mailing Address: New Mailing Address:

200 N PINE AVE 180 PINE AVE N OLDSMAR, FL 34677 OLDSMAR, FL 34677

FEI Number: 20-2114777 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RABIN, BENNETT L

200 N PINE AVE

OLDSMAR, FL 34677 US

HOPEN, ANTON
180 PINE AVE N
OLDSMAR, FL 34677 US

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: ANTON HOPEN 04/11/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D/S

Name: BRUDNY, MICHAEL
Address: 200 N PINE AVE
City-St-Zip: OLDSMAR, FL 34677

Title: D

Name: SPYCHALA, MICHAEL Address: 240 PINE AVE N City-St-Zip: OLDSMAR, FL 34677

Title: D/P

Name: HOPEN, ANTON Address: 180 PINE AVE N City-St-Zip: OLDSMAR, FL 34677

Title:

 Name:
 GALEANO, FERNANDO

 Address:
 150 PINE AVE N

 City-St-Zip:
 OLDSMAR, FL 34677

Title: D/T

Name: JOHNSON, RANDALL
Address: 4141 ARLINGTON DR
City-St-Zip: PALM HARBOR, FL 34685

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: RANDALL JOHNSON D 04/11/2011