

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005188

FILED  
Feb 16, 2009  
Secretary of State

Entity Name: CYPRESS PLAZA OFFICE CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

1190 PELICAN BAY DRIVE  
DAYTONA BEACH, FL 32119

## New Principal Place of Business:

10 FLARESTONE CT  
PALM COAST, FL 32137

## Current Mailing Address:

1190 PELICAN BAY DRIVE  
DAYTONA BEACH, FL 32119

## New Mailing Address:

10 FLARESTONE CT  
PALM COAST, FL 32137

FEI Number: 20-2866590

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BARKIN, MICHELE J  
1190 PELICAN BAY DRIVE  
DAYTONA BEACH, FL 32119 US

## Name and Address of New Registered Agent:

BLASETTI, COLLEEN A  
10 FLARESTONE CT  
PALM COAST, FL 32137 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: COLLEEN A. BLASETTI

02/16/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: RICHMOND, II, ROBERT W  
Address: 145 CYPRESS POINT PKWY., STE 105  
City-St-Zip: PALM COAST, FL 32164

Title: DVP ( ) Delete  
Name: KRAKOWSKI, PHILIP  
Address: 87 BRADDOCK LANE  
City-St-Zip: PALM COAST, FL 32137

Title: DST ( ) Delete  
Name: SUPINO, RON  
Address: 4 YORKTOWN CT.  
City-St-Zip: PALM COAST, FL 32137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: BLASETTI, COLLEEN A  
Address: 10 FLARESTONE CT  
City-St-Zip: PALM COAST, FL 32137

Title: DVP (X) Change ( ) Addition  
Name: SUPINO, RON  
Address: 4 YORKTOWN CT  
City-St-Zip: PALM COAST, FL 32137

Title: DST (X) Change ( ) Addition  
Name: HOK, DANNY  
Address: 9 HARBOR CENTER DR. #3  
City-St-Zip: PALM COAST, FL 32137

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: COLLEEN A. BLASETTI

DP

02/16/2009

Electronic Signature of Signing Officer or Director

Date