


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90281 018 ****61.25

DOCUMENT # N05000006744

1. Entity Name
CYPRESS PRESERVE AT COLONIAL RESIDENT'S ASSOCIATION, INC.



Principal Place of Business
**9148 BONITA BEACH RD STE 102
 BONITA SPRINGS, FL 34135**

Mailing Address
**9148 BONITA BEACH RD STE 102
 BONITA SPRINGS, FL 34135**

2. Principal Place of Business
c/o Integrated Property Mgmt.

3. Mailing Address
c/o Integrated Property Mgmt.

Suite, Apt. #, etc.
3435 - 10th Street N., #201

Suite, Apt. #, etc.
3435 - 10th Street N., #201

City & State
Naples, FL

City & State
Naples, FL

Zip
34103

Country

Zip
34103

Country

04052006 Chg-NP CR2E037 (11/05)

4. FEI Number
20-3084775

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**STACKHOUSE, EDWIN D
 9148 BONITA BEACH RD STE 102
 BONITA SPRINGS, FL 34135**

7. Name and Address of New Registered Agent

Name
SHIELDS, CHRISTOPHER J.

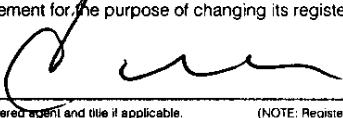
Street Address (P.O. Box Number is Not Acceptable)
1833 HENDRY STREET

City
PO DRAWER 1507

City
Ft. MYERS FL

Zip Code
33902

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  DATE **4/15/06**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is **\$61.25** Due by **May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to **Florida Department of State**

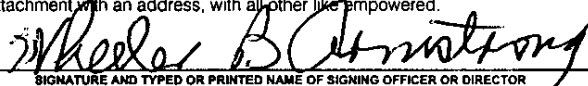
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP STACKHOUSE, EDWIN D 9148 BONITA BEACH RD STE 102 BONITA SPRINGS, FL 34135	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MCCORMICK, RICHARD 9148 BONITA BEACH RD STE 102 BONITA SPRINGS, FL 34135	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST RAY, LAURA 9148 BONITA BEACH RD STE 102 BONITA SPRINGS, FL 34135	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Anderson, Richard 191 Wedgewood Dr. Amherst, NY 14221	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Flora, Jerome 8000 Landis Avenue Sea Isle City, NJ 08243	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Armstrong, Wheeler 9535 Hemingway Lane Ft. Myers, FL 33913	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:  DATE **4-25-06** DAYTIME PHONE # **643 2912 246 0294**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

40001000

