2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 18, 2006
Secretary of State

DOCUMENT# N05000008179

Entity Name: CYPRESS LANDING CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

199 E MCNAB RD
POMPANO BEACH, FL

New Principal Place of Business:

Current Mailing Address:

199 E MCNAB RD
POMPANO BEACH, FL

New Mailing Address:

P.O. BOX 8290
CORAL SPRINGS, FL 33075

FEI Number: 20-3655587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CRONIG, STEVEN C
307 CONTINENTAL PLZ 3250 MARY ST
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

MARTIELLO, SAMUEL J JR
1303 NORTH STATE ROAD 7
SUITE B-1
MARGATE, FL 33063 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: SAMUEL J. MARTIELLO, JR. 10/18/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: DAVIS, DOUGLAS
Address: 310 CYPRESS CIR
City-St-Zip: KING OF PRUSSA, PA 19406

Title: DV ( ) Delete
Name: DAVIS, TONYA
Address: 310 CYPRESS CIR
City-St-Zip: KING OF PRUSSA, PA 19406

Title: DST ( ) Delete
Name: DAVIS, CRYSTAL
Address: 310 CYPRESS CIR
City-St-Zip: KING OF PRUSSA, PA 19406

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: PRES ( ) Change (X) Addition
Name: CARROLL, CHRISTOPHER
Address: 199 E. MCNAB ROAD APT 109
City-St-Zip: FORT LAUDERDALE, FL 33060

I hereby certify that the information supplied with this filing does not qualify for the 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: DOUGLAS DAVIS DP 10/18/2006
Electronic Signature of Signing Officer or Director Date