

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008179

FILED
Jan 09, 2007
Secretary of State

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:

P.O. BOX 8290
CORAL SPRINGS, FL 33075

New Mailing Address:

FEI Number: 20-3655587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARTIELLO, SAMUEL J JR
1303 NORTH STATE ROAD 7
SUITE B-1
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

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:

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

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

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

PRES

01/09/2007

Electronic Signature of Signing Officer or Director

Date