2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05153

FILED Feb 28, 2008 Secretary of State

Entity Name: CYPRESS COVE PROPERTY OWNERS' ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 1222 CYPRESS COVE COURT 3580 E GULF TO LAKE HWY INVERNESS, FL 34450 INVERNESS, FL 34453 **Current Mailing Address: New Mailing Address:** P.O. BOX 387 INVERNESS, FL 34451 US FEI Number: 59-2966698 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: PONTICELLI, MICHAEL JR ELDREDGE, ROBERT J 3580 E GULF TO LAKE HWY 1222 CYPRESS COVE COURT INVERNESS, FL 34453 INVERNESS, FL 34450 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: ROBERT J ELDREDGE 02/28/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition PONTICELLI, MICHAEL JR ELDREDGE, ROBERT J Name: Name: 1222 CYPRESS COVE COURT Address: 3580 E GULF TO LAKE HWY Address: INVERNESS, FL 34450 City-St-Zip: City-St-Zip: INVERNESS, FL 34453 US Title: () Delete Title: (X) Change () Addition MARTONI, PAUL Name: MARTONI, PAUL Name: Address: 1316 CYPRESS COVE COURT Address: 1316 CYPRESS COVE COURT City-St-Zip: INVERNESS, FL 34450 City-St-Zip: INVERNESS, FL 34450 US Title: () Delete Title: (X) Change () Addition OCONNOR, PAT WALDRON, TONIA L Name: Name: 22 NASHUA WAY 9340 W PUTTER CT Address: Address: City-St-Zip: OCALA, FL 34482 City-St-Zip: CRYSTAL RIVER, FL 34429 US Title: Title: () Change (X) Addition () Delete Name: Name: MORRIS, MATT 1306 CYPRESS COVE CT Address: Address: City-St-Zip: City-St-Zip: INVERNESS, FL 34450 US Title: () Delete Title: () Change (X) Addition DETMER, DAN Name: Name: 1256 CYPRESS COVE CT Address: Address: City-St-Zip: City-St-Zip: INVERNESS, FL 34450 US Title: () Delete Title: () Change (X) Addition PONTICELLI, MIKE Name: Name: Address: Address: 1222 CYPRESS COVE CT INVERNESS, FL 34450 US City-St-Zip: City-St-Zip:

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: ROBERT J ELDREDGE Ρ 02/28/2008