

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010193

FILED
May 08, 2008
Secretary of State

Entity Name: CYPRESS WALK TOWNHOME CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2830 SCHERER DRIVE NORTH SUITE 300
ST PETERSBURG, FL 33716

New Principal Place of Business:

2423 KOKOMO WAY
NEW PORT RICHEY, FL 34655

Current Mailing Address:

2830 SCHERER DRIVE NORTH SUITE 300
ST PETERSBURG, FL 33716

New Mailing Address:

2423 KOKOMO WAY
NEW PORT RICHEY, FL 34655

FEI Number: 45-0546650 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

GORDON, STEVEN R
2830 SCHERER DRIVE NORTH SUITE 300
ST PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

JOHN, CECALA
2423 KOKOMO WAY
NEW PORT RICHEY, FL 34655 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: JOHN CECALA

05/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GORDON, STEVEN R
Address: 2830 SCHERER DRIVE NORTH SUITE 300
City-St-Zip: ST PETERSBURG, FL 33716

Title: DVP (X) Delete
Name: LEE, DAVID
Address: 2830 SCHERER DRIVE NORTH SUITE 300
City-St-Zip: ST PETERSBURG, FL 33716

Title: DS (X) Delete
Name: BURGESSON, NOELLA
Address: 2830 SCHERER DRIVE NORTH SUITE 300
City-St-Zip: ST PETERSBURG, FL 33716

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: JOHN, CECALA
Address: 2423 KOKOMO WAY
City-St-Zip: NEW PORT RICHEY, FL 34655

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 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: JOHN CECALA

DPST

05/08/2008

Electronic Signature of Signing Officer or Director

Date