## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Feb 09, 2005 8:00 am **Secretary of State** DOCUMENT # N07354 1. Entity Name 02-09-2005 90060 001 \*\*\*\*61.25 THE ASSOCIATION OF CYPRESS GARDENS MOBILE HOME PARK HOMEOWNERS, INC. Principal Place of Business Mailing Address WINTER HAVEN FL 33884 US 69 WRIGHT ST WINTER HAVEN FL 33884 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) Applied For 4. FEI Number City & State City & State 59-2521597 Not Applicable Country \$8.75 Additional Country Zip Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WOOD, THELMA Street Address (P.O. Box Number is Not Acceptable) 69 WRIGHT ST WINTER HAVEN FL 33884 Zip Code 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: Signature, typed or printed name of registered as FILE NOW: FEE IS \$61,25 Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be Make Check Payable to 9. Election Campaign Financing ீ ∀ Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State 15 13 K ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Delete TITLE CLARK, Joyce, 46 YORK ST. BOSSARD, MARY NAME NAME 51 WRIGHT ST. STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33884 INTER HAVEN FL 33884 CITY-ST-ZIP CITY-ST-7IP DELWARDS, G.G. 2 Wells ST. ☐ Delete TITLE TITLE WOOD, THELMA NAME NAME 69 WRIGHT ST STREET ADDRESS STREET ADDRESS DYOUNG TANET \_\_ Change 44 YORK ST. WINTER HAVEN FL 33884 CITY-ST-ZIP CITY-ST-ZIP & V-PRES. TITLE THILE ☐ Delete ROE, MARIE NAME NAME STREET ADDRESS 146 ASHLEY ST. STREET ADDRESS Winter Haven, FL 33884 Rirchie, Henry Och WINTER HAVEN FL 33884 CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE Delete IIII F PETERSON, FAYE NAME NAME 77 CANAL ST. 39 A CHIVE ST. STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33884 CITY-ST-7IP CITY-ST-ZIP DONALOSON, Robert Change 48 WRIGHT ST. Delete TITLE TITLE BRANDELL, BILL NAME NAME 20A BECK ST. STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33884 CITY-ST-7IP CITY+ST-7IP ■ Addition ☐ Detete TITLE TITLE

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

STREET ADDRESS

CITY-ST-ZIP

NAME

SWAUGER, CAROL

WINTER HAVEN FL 33884

15 BECK ST.

NAME

STREET ADDRESS

CITY-ST-ZIP