

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jun 16, 2010
Secretary of State**

DOCUMENT# N08000003362

Entity Name: CYPRESS LAKES CORPORATE CENTER COMMERCIAL CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2057 N POINTE ALEXIS DR
TARPON SPRINGS, FL 34689**New Principal Place of Business:**255 PINE AVE N
OLDSMAR, FL 34677**Current Mailing Address:**2057 N POINTE ALEXIS DR
TARPON SPRINGS, FL 34689**New Mailing Address:**255 PINE AVE N
OLDSMAR, FL 34677**FEI Number:** 26-3310687**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BLEAKLEY, DALE E
2057 N POINTE ALEXIS DR
TARPON SPRINGS, FL 34689 US**Name and Address of New Registered Agent:**VINAS, LOURDES M
255 PINE AVE N
OLDSMAR, FL 34677 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: LOURDES M VINAS

06/16/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: VINAS, LOURDES M
Address: 255 PINE AVE N
City-St-Zip: OLDSMAR, FL 34677

Title: DS
Name: HAMM, BRIAN D
Address: 253 PINE AVE N, BLDG B
City-St-Zip: OLDSMAR, FL 34677

Title: DV
Name: PECK, CHAD T
Address: 253 PINE AVE N, BLDG A
City-St-Zip: OLDSMAR, FL 34677

I hereby 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 all other like empowered.

SIGNATURE: LOURDES M VINAS

DP

06/16/2010

Electronic Signature of Signing Officer or Director

Date