

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004160

FILED
Mar 10, 2009
Secretary of State

Entity Name: CYPRESS COURTYARD COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8890 WEST OAKLAND PARK BLVD, SUITE 201
SUNRISE, FL 33351

New Principal Place of Business:

8890 WEST OAKLAND PARK BLVD,
SUITE 201
SUNRISE, FL 33351

Current Mailing Address:

8890 WEST OAKLAND PARK BLVD, SUITE 201
SUNRISE, FL 33351

New Mailing Address:

8890 WEST OAKLAND PARK BLVD.
SUITE 201
SUNRISE, FL 33351

FEI Number: 32-0247110

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRAZIER, JR., ROBERT W ESQ.
6550 NORTH FEDERAL HWY
SUITE 220
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

HOTTE, JOHN F ESQ.
350 EAST LAS OLAS BLVD.
SUITE 1700
FT LAUDERDALE, FL 33301 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 F. HOTTE ESQ

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOTTE, DANIEL
Address: 8890 WEST OAKLAND PARK BLVD, SUITE 201
City-St-Zip: SUNRISE, FL 33351

Title: VPAS () Delete
Name: ANTONUCCI, JAMES F
Address: 7802 KINGSPPOINT PKWY, STE 208B
City-St-Zip: ORLANDO, FL 32819

Title: STD () Delete
Name: RATHBUN, MARION
Address: 8890 WEST OAKLAND PARK BLVD, SUITE 201
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPAS (X) Change () Addition
Name: ANTONUCCI, JAMES F
Address: 13538 VILLAGE PARK BLVD. SUITE 125
City-St-Zip: ORLANDO, FL 32837

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: DANIEL HOTTE

PD

03/10/2009

Electronic Signature of Signing Officer or Director

Date