

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10136

FILED  
Mar 16, 2010  
Secretary of State

**Entity Name:** CYPRESS BEND CONDOMINIUM V ASSOCIATION, INC.

**Current Principal Place of Business:**

3500 GATEWAY DRIVE  
#202  
POMPANO BEACH, FL 30369 US

**New Principal Place of Business:**

3500 GATEWAY DRIVE  
#202  
POMPANO BEACH, FL 33069 US

**Current Mailing Address:**

3500 GATEWAY DRIVE  
#202  
POMPANO BEACH, FL 33069 US

**New Mailing Address:**

**FEI Number:** 59-2552569      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MWI BROWARD INC.  
3500 GATEWAY DRIVE  
#202  
POMPANO BEACH, FL 33069 US

**Name and Address of New Registered Agent:**

CROZIER, BARBARA P  
3500 GATEWAY DRIVE  
#202  
POMPANO BEACH, FL 33069 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: BC

03/16/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: CROZIER, BARBARA P  
Address: 3500 GATEWAY DR # 202  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VPSE  
Name: TRAVIESO, JOSH  
Address: 3500 GATEWAY DR # 202  
City-St-Zip: POMPANO BEACH, FL 33069

Title: TREA  
Name: TOSCANO, GEORGE  
Address: 3500 GATEWAY DR # 202  
City-St-Zip: POMPANO BEACH, FL 33069

Title: DIR  
Name: DOYON, DENIS  
Address: 3500 GATEWAY DR # 202  
City-St-Zip: POMPANO BEACH, FL 33069

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: BC

P

03/16/2010

Electronic Signature of Signing Officer or Director

Date