2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2009
Secretary of State

DOCUMENT# N13121

Entity Name: CYPRESS BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

13459-A MOSSY CYPRESS DRIVE
JACKSONVILLE, FL 32223 US

New Principal Place of Business:

Current Mailing Address:

13459-A MOSSY CYPRESS DRIVE
JACKSONVILLE, FL 32223 US

New Mailing Address:

FEI Number: 59-2767773 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARLAND, CLAY
13459-A MOSSY CYPRESS DR
JACKSONVILLE, FL 32223 US

Name and Address of New Registered Agent:

MCGINNIS, JOHN H III
13459-A MOSSY CYPRESS DR
JACKSONVILLE, FL 32223 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 H. MCGINNIS, III 03/18/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: AKEL, KAREN
Address: 13459-A MOSSY CYPRESS DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

Title: PD ( ) Delete
Name: HARLAND, CLAY
Address: 13459-A MOSSY CYPRESS DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: VD ( ) Delete
Name: SMITH, RALPH
Address: 13450-A MOSSY CYPRESS DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TREA (X) Change ( ) Addition
Name: STEPHENSON, ANGELA
Address: 13459-A MOSSY CYPRESS DRIVE
City-St-Zip: JACKSONVILLE, FL 32223

Title: PD (X) Change ( ) Addition
Name: MCGINNIS, JOHN H III
Address: 13459-A MOSSY CYPRESS DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: VP (X) Change ( ) Addition
Name: SMITH, RALPH
Address: 13450-A MOSSY CYPRESS DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: SEC ( ) Change (X) Addition
Name: MCCOY, GRADY
Address: 13450-A MOSSY CYPRESS DR.
City-St-Zip: JACKSONVILLE, FL 32223

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 H. MCGINNIS, III PRES 03/18/2009
Electronic Signature of Signing Officer or Director Date