## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 15, 2007 8:00 am Secretary of State

DOCUMENT # N15316  1. Entity Name CYPRESS LAKES AT BOCA RIO HOMEOWNERS ASSOCIATION, INC.									)2-15-20	_		***61.25	5	
Principal Place of Business 8207 SEVERN DRIVE BOCA RATON, FL 33433 US			8207	Mailing Address 8207 SEVERN DRIVE BOCA RATON, FL 33433 U				40018131						
								111111111111111111111111111111111111111	1				MIL 11 (18)	
2. Principal Place of Business - No P.O. Box #			3. Mailing Address											
Suite, Apt.	#, etc.		Sui	te, Apt. #, etc.				01162007	Chg-NP	•	CR2E03	7 (12/06)		
City & State		City & State					4. FEI Numb 59-269				_ <del>                                    </del>	oplied For ot Applicable		
Zip	Cor	untry	Zip		Cou	intry		5. Certificate	of Status D	esired		8.75 Add		
	6. Name and Ad	idress of Currer	nt Registere	d Agent				7. Name and	Address o	f New Reg	istered A	gent		
JEFFREY R. MARGOLIS, P.A. C/O DUANE MORRIS LLP 200 SOUTH BISCAYNE BLVD., SUITE 34			3400	400			Name James N. Krivok clo Dicker, Krivok & Stoloff, PA.  Street Address (P.D. Box, Number is Not Acceptable) 1818 Australian Ave.							
MIAMI, FL	33131						te (	100						
							st Palm Beach Fl				FL	Zip Cod	<sup>®</sup> 09	
	named entity submi		for the purp	ose of changing its	registeri	ed office or	register	ed agent, or bo	in, in the St	ate of Fiors مار	0a. 1am1	amiliar with,	and accept	
	Signature, typed or printed	name of registered age	ent and title if app	licable. (NOTE	: Registere	d Agent signatu	re required	when reinstating)			DATE			
	Filing Fee is \$ Due by May 1,	61.25	ent and title if app	9. Election Carr Trust Fund C	npaign F	inancing	re required	\$5.00 May E Added to Fees			ke check	payable t		
10.	Filing Fee is \$ Due by May 1,	61.25		9. Election Cam Trust Fund C	npaign F	inancing ion.		\$5.00 May B Added to Fees	IANGES TO	Florid	ke check la Depart	ment of S	V 10	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$ Due by May 1,	61.25 2007 DEFICERS AND O NETTE DRIVE		9. Election Carr	npaign Fontribut  11.  TITU  NAM  STRE	inancing ion.	U:00	\$5.00 May B Added to Fees ADDITIONS/CH E Presic Lise MC	IANGES TO JECAT C COT C	Florid OFFICERS NICK /E	ke check la Depart	ment of S	tate	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PROES ICHE AT

1/16/01

561-483-9600