2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2009
Secretary of State

DOCUMENT# N15610

Entity Name: THE LANDINGS ON CYPRESS GREENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O TREASURER
6000 NW 94TH AVE
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

C/O TREASURER
6000 NW 94TH AVE
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 59-2773626 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GARFINKEL, KATZMAN
1501 N.W. 49TH ST.
STE 202
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: GELB, MARTHA
Address: 6031 N W 91 WAY
City-St-Zip: TAMARAC, FL 33321

Title: PRES ( ) Delete
Name: PAGE, JERRY
Address: 6153 NW 91 AVE
City-St-Zip: TAMARAC, FL 33321

Title: SP ( ) Delete
Name: CRAWFORD, LAVENA
Address: 6041 N W 91 WAY
City-St-Zip: TAMARAC, FL 33321

Title: PD ( ) Delete
Name: HOFFMAN, MATTHEW
Address: 6037 N W 91 WAY
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MARTHA GELB TD 01/25/2009

Electronic Signature of Signing Officer or Director — Date