

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 28 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N17752 (9)

1. Corporation Name

CYPRESS BEND CONDOMINIUM VI ASSOCIATION, INC.



Principal Place of Business

Mailing Address

2217 CYPRESS ISLAND DR.  
APT. #205  
POMPANO BEACH FL 33069  
US2217 CYPRESS ISLAND DR.  
APT. #205  
POMPANO BEACH FL 33069-4441  
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAYE & ROGER, PA  
800 E CYPRESS CREEK RD  
SUITE 400  
FT LAUDERDALE FL 33334

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	RANDAZZO, ROSE	
STREET ADDRESS	2217 CYPRESS ISLAND DR., #205	
CITY-ST-ZIP	POMPANO BEACH FL	

TITLE	VD	<input type="checkbox"/> DELETE
NAME	KLEINGARTNER, ELMER	
STREET ADDRESS	2217 CYPRESS ISLAND DR., #205	
CITY-ST-ZIP	POMPANO BEACH FL	

TITLE	SD	<input type="checkbox"/> DELETE
NAME	D'AGASTA, GUSSIE	
STREET ADDRESS	2217 CYPRESS ISLAND DR., #205	
CITY-ST-ZIP	POMPANO BEACH FL	

TITLE	TD	<input type="checkbox"/> DELETE
NAME	ZWEIGENBAUM, NANETTE	
STREET ADDRESS	2217 CYPRESS ISLAND DR., #205	
CITY-ST-ZIP	POMPANO BEACH FL	

TITLE	P	<input type="checkbox"/> DELETE
NAME	PETERS, BARBARA	
STREET ADDRESS	2217 CYPRESS ISLAND DR., #205	
CITY-ST-ZIP	POMPANO BEACH FL	

TITLE	D	<input type="checkbox"/> DELETE
NAME	MAX, TEDDY	
STREET ADDRESS	2217 CYPRESS ISLAND DR., #205	
CITY-ST-ZIP	POMPANO BEACH FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	ARNOLD LITTMAN
1.3 STREET ADDRESS	2221 CYPRESS ISL. DR. # 303
1.4 CITY-ST-ZIP	POMPANO BEACH, FL 33069

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	CHECK #: 1368
3.4 CITY-ST-ZIP	DATE PAID: 02-15-97

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	ALLOC. #: 10413
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0025849

CR2E037 (9/96)