

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21163

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** CYPRESS VILLAGE, INC.

**Current Principal Place of Business:**

149 WELDON PKWY  
SUITE 115  
MARYLAND HEIGHTS, MO 63043 US

**New Principal Place of Business:**

**Current Mailing Address:**

149 WELDON PARKWAY  
SUITE 115  
MARYLAND HEIGHTS, MO 63043 US

**New Mailing Address:**

**FEI Number:** 59-2820073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NATIONAL CORPORATE RESEARCH, LTD., INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: PD  
Name: ANDERSON, MARK D MR  
Address: 149 WELDON PARKWAY, SUITE 115  
City-St-Zip: MARYLAND HEIGHTS, MO 63043

Title: VTD  
Name: ZIMMERMAN, GARY MR  
Address: 149 WELDON PARKWAY, SUITE 115  
City-St-Zip: MARYLAND HEIGHTS, MO 63043

Title: SD  
Name: CRAWFORD, MARY RUTH MS  
Address: 149 WELDON PARKWAY, SUITE 115  
City-St-Zip: MARYLAND HEIGHTS, MO 63043 US

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: MARY RUTH CRAWFORD

SECY

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date