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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

BENT CYPRESS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

STREET CHIEF POAT

FILED Apr 22 1997 8:00am Secretary of State



| WEST PALM BE | | WEST PALM BEACH FL 3341 | 4-6061 | | | |
|-----------------------------|---|--|--------------------------------------|--|----------------------------------|---|
| | | | | 3. Date Incorporated or Qualified 04/20/1988 | 3a. Date of t 02/1 | 9/1996 |
| | ace of Business | 2a. Malling Address | 1.1.1.0/ | 4. FEI Number | | Applied For |
| | PS-C-ForestHill Blud. | 26 12785-CFOR | esthill bluo | 65-0096876 | | Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | .75 Additional ee Required |
| City & State | ilinston fC | City & State | n FL | Election Campaign Financing Trust Fund Contribution | | 5.00 May Be dded to Fees |
| | 44 Country USA | 29 3344 3 | Country | This corporation has liability for Florida Statutes | r intarígible tax un Ves 🔲 No | nder s. 199.032, |
| | 9. Name and Address of Current | | | 10. Name and Address of New F | eglatered Agent | |
| | | | 81 Name | John Newsome | | |
| MCLAUG | GHLIN, ROBERT C | | 62 Street | Address (P.O. Box Number is Not Accepte | ahle) | |
| | OLO CLUB ROAD | | 555 | (action (.c. por harmon) a flot recopi | | |
| WEST PA | ALM BEACH FL 33414 | | 83 | 12785-C Forest Hill | Blud | |
| | | 1 | 84 City | Wellington | FL 85 | Zio Code |
| 11. Pursuant I | to the provisions of Sections 617 1502 | and 617 1508 Phorida Statutes | the above-named | corporation submits this statement for the | purpose of chan | ging its registered |
| office or re agent. I ar | egistered agent or both in the State on familiar with, and adequathe obliga | o Florida. Such diange was aut Jorga Section 5 7.0503, Florid | thorized by the corp da Statutes. | corporation submits this statement for the poration's board of directors. I hereby according to the control of the corporation's board of directors. | ept the appointme | ant as registered |
| SIGNATURE _ | Signature typin or printed name of registered agen | | | required when reinstating) | DATE | *************************************** |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFF | ICERS AND DIRE | CTORS IN 12 |
| TITLE | DP | DELETE | 1.1 TITLE | D | ☐ CH | hange |
| NAME | MCLAUGHLIN, ROBERT C | | 1.2 NAME | Albn B Snow | | |
| STREET ADDRESS | 11809 POLO CLUB ROAD | | 1.3 STREET ADDRESS | 11809 Polo Clubed. | | |
| CITY-ST-ZIP | WEST PALM BEACH FL 33414 | , | 1.4 CITY - ST - ZIP | wellington EL 33414 | | |
| TITLE | DVP | DELETE | 2.1 TITLE | | ☐ C+ | hange Addition |
| NAME | O'CONNER, TIM | | 2.2 NAME | | | |
| STREET ADDRESS | 11809 POLO CLUB ROAD | | 2.3 STREET ADDRESS |) | | |
| CITY-ST-ZIP | WEST PALM BEACH FL 33414 | | 2. 4 CITY - ST- ZIP | | | |
| TITLE | DT | DELETE | 3.1 T(TLE | 0 | CH | hange Addition |
| NAME | SKINNER, HAROLD | | 3.2 NAME | Tack welsh | | |
| STREET ADDRESS | 11809 POLO CLUB ROAD | | 3.3 STREET ADDRESS | 11809 POW Club Pd | | |
| CITY-ST-ZIP | WEST PALM BEACH FL 33414 | , | 3.4. CITY-ST-ZIP | Wellinston fc 33414 | | |
| TITLE | DS | DELETE | 4.1 TITLE | D | ☐ Cr | hange Addition |
| NAME | HEGARTY, MARY BETH | | 4, 2 NAME | Tammy Greeley | _ | |
| STREET ADDRESS | 11809 POLO CLUB ROAD | | 4.3 STREET ADDRESS | 11809 Polo Chb 8d | | |
| CITY-ST-ZIP | WEST PALM BEACH FL 33414 | | 4.4 CITY-ST-ZIP | wellington CL 33414 | | |
| TITLE | DVP | DELETE | 5.1 TITLE | <u> </u> | Ci | hange Addition |
| NAME | CARR, DAN | | 5.2 NAME | clark Hetherinaha | | |
| STREET ADDRESS | 11809 POLO CLUB ROAD | | 5.3 STREET ADDRESS | 11909 robochibed wellington FL 33416 | | |
| CITY-ST-ZIP | WEST PALM BEACH FL 33414 | 1 | 5.4 CITY - ST - ZIP | wellington FL 33416 | | |
| TITLE | VIEOT I NEW DENOTITE 0041 | ☐ DELETE | 6.1 TITLE | , , , , , , , , , , , , , , , , , , , | CI | hange Addition |
| NAME | | | 62 NAME | 1 | | - yr tend (mark to) |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | |
| 1 | | | 1 | | | |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | 148 07/0// 51 14 8 | | |

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.