2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2000 8:00 am
Secretary of State
02-26-2000 90072 046 ****61.25

DOCUMENT # N26107

1. Entity Name

CYPRESS LAKE AT WINSTON PARK HOMEOWNERS' ASSOCIA

Principal Place of Business	Mailing Address
5000 NW 54TH ST COCONUT CREEK FL 33073 US	5000 NW 54TH ST COCONUT CREEK FL 33073-3732 US

U00026955

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	7932 Wiles Road Suite, Apt. #, etc.
City & State	Coral Springs FL
Zip / Country	33067 / USA

4. FEI Number 65-0069703 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KAYE & ROGER, P.A.
6261 N.W. 6TH WAY, SUITE 103
FT. LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BRUNNER, JIM 5520 NW 50 WAY COCONUT CREEK FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President-Director Munoz, Rita 5511 NW 50 Ave Coconut Creek, FL 33073	XX ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MUNOZ, RITA 5511 NW 50 AVE. COCONUT CREEK FL 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vie President-Director Bellaflores, Robert 5521 NW 50 Ave Coconut Creek, FL 33073	XX ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HANSEN, CLAY 5561 NW 49TH WAY COCONUT CREEK FL 33073	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sec-Director Cardella, Vito 5500 NW 49 Ave Coconut Creek, FL 33073	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BELLAFLORES, ROBERT 5521 NW 50 AVE. COCONUT CREEK FL 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treas-Director Clark, Sandra 4901 NW 55 St Coconut Creek, FL 33073	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLARK, SANDRA 4901 NW 55 ST. COCONUT CREEK FL 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Violandi, Carmen 5120 NW 54 St Coconut Creek FL 33073	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

12. I 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 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: Rita Munoz REQUIRED 1/14/00 954-344-5353
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #