

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26768

FILED
Apr 25, 2008
Secretary of State

Entity Name: CYPRESS CHASE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

19091 TAMIAMI TRAIL SE
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

PO BOX 686
ESTERO, FL 339280686 US

New Mailing Address:

FEI Number: 65-0092681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINWORTHY, JUDY B
19125 CYPRESS VIEW DR
FT MYERS, FL 33967 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: P () Delete
Name: BOCKMAN, VICTOR E
Address: 19070 CYPRESS VIEW DR
City-St-Zip: FORT MYERS, FL 33912

Title: T () Delete
Name: KINWORTHY, JUDY
Address: 19125 CYPRESS VIEW DR
City-St-Zip: FORT MYERS, FL 33912

Title: S () Delete
Name: MASTASI, LUCIA
Address: 19236 CYPRESS VIEW DR
City-St-Zip: FT MYERS, FL 33912

Title: VP () Delete
Name: CHLUAHOUSE, CHAO
Address: 19236 CYPRSS VIEW DR
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: HAGER, KIMBERLY
Address: 18930 CYPRESS VIEW DR
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: BURKE, ED
Address: 18990 CYPRESS VIEW DR
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CULUAHOUSE, CHAD
Address: 19236CYPRESS VIEW DR
City-St-Zip: FORT MYERS, FL 33967

Title: T (X) Change () Addition
Name: KINWORTHY, JUDY
Address: 19125 CYPRESS VIEW DR
City-St-Zip: FORT MYERS, FL 33967

Title: S (X) Change () Addition
Name: MASTASI, LUCIA
Address: 19236 CYPRESS VIEW DR
City-St-Zip: FT MYERS, FL 33967

Title: VP (X) Change () Addition
Name: BURKE, ED
Address: 18990 CYPRSS VIEW DR
City-St-Zip: FORT MYERS, FL 33967

Title: D (X) Change () Addition
Name: HAGER, KIMBERLY
Address: 18930 CYPRESS VIEW DR
City-St-Zip: FORT MYERS, FL 33967

Title: D (X) Change () Addition
Name: MAYO, TOM
Address: 18977 CYPRESS VIEW DR
City-St-Zip: FORT MYERS, FL 33967

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: JUDY B. KINWORTHY

T

04/25/2008

Electronic Signature of Signing Officer or Director

Date