

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31336

**FILED**  
**Jan 19, 2010**  
**Secretary of State**

**Entity Name:** CYPRESS RIDGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

579 NORTH CYPRESS DRIVE  
TEQUESTA, FL 33469 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3055  
JUPITER, FL 33469 US

**New Mailing Address:**

**FEI Number:** 59-2716759

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILSON, JENNIFER A  
579 NORTH CYPRESS DRIVE  
TEQUESTA, FL 33469 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: TREA  
Name: WILSON, JENNIFER A  
Address: 579 NORTH CYPRESS DRIVE  
City-St-Zip: TEQUESTA, FL 33469

Title: PD  
Name: MILMAN, MARC  
Address: 585 CYPRESS DR  
City-St-Zip: TEQUESTA, FL 33469

Title: VP  
Name: WENDY, SCHMIDT  
Address: 509 CYPRESS DRIVE NORTH  
City-St-Zip: TEQUESTA, FL 33469

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: JENNIFER WILSON

TREA

01/19/2010

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

\_\_\_\_\_  
Date