2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 28, 2010
Secretary of State

DOCUMENT# N31690

Entity Name: CYPRESS LAKES HOMEOWNERS' ASSOCIATION OF PASCO, INC.

Current Principal Place of Business:

8507 SIAMANG COURT
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 38
ELFERS, FL 34680

New Mailing Address:

FEI Number: 65-0187677 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FEE, ALEXANDRA
8507 SIGMANG CT
NEW PORT RICHEY, FL 34653 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: S
Name: MORE, JANET
Address: 8601 CYPRESS LAKES BLVD
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: TD
Name: FEE, ALEXANDRA
Address: 8507 SIAMANG CT
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: BURKE, MARYANNE
Address: 4702 SPRING SIDE DR.
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VP
Name: GASPARINI, SANDRO
Address: 4520 DUMONT ST
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: KENNY, ELIZABETH
Address: 4710 SPRING SIDE DR
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: P
Name: PARKER, DAVID
Address: 4711 DUMONT ST
City-St-Zip: NEW PORT RICHEY, FL 34653

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: ALEXANDRA FEE TD 09/28/2010

Electronic Signature of Signing Officer or Director — Date