

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31690

FILED  
Feb 14, 2012  
Secretary of State

**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: DESTEFANO, LISA  
Address: 8402 PINEFORE DR.  
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: CAPORALE, GERAARD  
Address: 8632 CYPRESS LAKES BLVD  
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: KALOGIANIS, CONSTANTINE  
Address: 4752 CRESTKNOLL LANE  
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

02/14/2012

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

\_\_\_\_\_  
Date