2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 28, 2008 8:00 am Secretary of State DOCUMENT # N35157 1. Entity Name 04-28-2008 90383 029 ****61.25 CYPRESS ISLE HOMEOWNERS ASSOCIATION OF ORANGE COUNTY, INC. Principal Place of Business Mailing Address 2180 W SR 434 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779-5044 US STE 5000 LONGWOOD, FL 32779 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. 02202008 CR2E037 (12/06) Applied For City & State City & State 4. FEI Number 59-3129698 Not Applicable Zip \$8.75 Additional Country 7in Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HART, JAMES W JR Street Address (P.O. Box Number is Not Acceptable) SENTRY MANAGEMENT INC 2180 W SR 434, STE. 5000 LONGWOOD, FL 32779 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstoring) Signature, typed or printed name of registered agent and ride if applicable Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2008 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. TD TITLE ▲ Addition TITLE ☐ Delete NAME HIGGINS, NICK NAME FOLEY, BILL STREET ADDRESS 10308 CYPRESS ISLE CT. STREET ADDRESS 10300 CYPRESS ISLE CT ORLANDO, FL 32836 CITY-ST-ZIP ORLANDO, FL 32836 CITY-ST-ZIP Change ☐ Additio VPN ☐ Delete TITLE TITLE NAME COURIER, BRETT NAME 8816 SUNSET BOULEVARD STREET ADDRESS STREET ADDRESS ORLANDO, FL 32836 CITY - ST - ZIP CITY-ST-7IP Change ☐ Additio ☐ Delete TITLE TITLE JAHREIS, JOHN - 1 NAME STREET ADDRESS 10213 TROUT LANE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32835 CITY-ST-ZIP ☐ Change Additio Delete TITLE TITLE NAME DARLEY, JOHN NAME STREET ADDRESS STREET ADDRESS 10316 CYPRESS ISLE COURT CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 32836 TITLE ☐ Delete TITLE Change Additio NAME DOOLEY, MICHAEL NAME STREET ADDRESS STREET ADDRESS 10340 CYPRESS ISLE CT CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 32836 Change ☐ Additio ☐ Delete TITLE TITLE LANDIS, JOE NAME NAME STREET ADDRESS STREET AUDRESS | 8808 SUNSET BLVD CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 32836 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplied 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 attackment with a address, with all other like empowered.

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