## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N42439

FILED Jan 07, 2010 Secretary of State

Entity Name: CYPRESS KNEE COVE MOBILE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

% MARILYN REID 6711 WINDWARD PALMS CT LAKE WALES, FL 33898

**New Mailing Address: Current Mailing Address:** 

% MARILYN REID 6711 WINDWARD PALMS CT LAKE WALES, FL 33898

FEI Number: 59-3051899 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

REID, MARILYN J 6711 WINDWARD PALMS CT LAKE WALES, FL 33898

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:** 

REID, MARILYN Name:

Address: 6711 WINDWRD PALMS COURT City-St-Zip: LAKE WALES, FL 33898

Title:

Name: LOCKE, RUTH

Address: 6775 DONALDSON DRIVE City-St-Zip: LAKE WALES, FL 33898

Title: VΡ

STEWARD, HARTLEY Name: Address: 6726 DONALDSON DR City-St-Zip: LAKE WALES, FL 33898

Title: вм

Name: PETREY, ROBERT 6762 DONALDSON DR Address: City-St-Zip: LAKE WALES, FL 33898

Title: BM Name: ELY, KEITH

6766 DONALDSON DR Address: LAKE WALES, FL 33898 City-St-Zip:

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: MARILYN REID STD 01/07/2010