2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N42771

1. Entity Name



Feb 02, 2006 8:00 am **Secretary of State**

02-02-2006 90079 026 ****61.25

FILED

CYPRES		AT WILDCAT RUN IC.	CONE	OMINIUM							
Principal Place of Business 20891 WILDCAT RUN DR SUITE 104 ESTERO, FL 33928 US Mailing Address P.O. BOX 0844 ESTERO, FL 33928-0844					<u> </u>			I MAN MYN RYT	am tin eit	aa n nn	
2. Principal Place of Business 3. Mailing Address											
Suite, Apt. #, etc.			Su	Suite, Apt. #, etc.			01102006	Chg-NP	CR2E037	7 (11/05)	
City & State			Cit	City & State			4. FEI Number 65-0289	1470		<u> </u>	plied For ot Applicable
Zip	Country		Zip	Zip Cou		untry			8.75 Add se Require		
	6. Name	and Address of Current	Registere	d Agent			7. Name and	Address of New R	egistered A	gent	
DUANEWE	E CEDALI	n				Name					
PHANEWE, GERALD 20891-4 WILDCAT RUN DR ESTERO, FL 33928			Street Address			ss (P.O. Box Numbe	r is Not Acceptable	e)			
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				City					FL	Zip Code	е
	tions of regist	y submits this statement for ered agent. or printed (name of registered agent)					istered agent, or both	n, in the State of Fi	orida. 1 am 18	amiliar with,	and accept
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\$		e is \$61.25 fay 1, 2006		9. Election Ca Trust Fund	. •	Financing _	\$5.00 May Be Added to Fees	y 1	lake check rida Depart		A
10.			RECTORS	_ Trust Fund	. •	Financing tion.	\$5.00 May Bo Added to Fees	y 1	rida Depart	ment of St	tate
10. TITLE		fay 1, 2006	RECTORS	_ Trust Fund	Contribut	Financing tion.	\$5.00 May Bo Added to Fees	Floi	rida Depart	ment of St	tate
TITLE NAME	VPD BUCKNE	OFFICERS AND DIF	RECTORS	_ Trust Fund	Contribut 11.	Financing tion.	\$5.00 May Bo Added to Fees	Floi	rida Depart	ment of SI ECTORS IN	tate
TITLE NAME STREET ADDRESS	VPD BUCKNEA 20881-207	OFFICERS AND DIF A, OLGA 7 WILDCAT RUN DR	RECTORS	_ Trust Fund	11. THE	Financing tion.	\$5.00 May Bo Added to Fees	Floi	rida Depart	ment of SI ECTORS IN	tate
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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 supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

GERALD J PHANEUF Thuncus CE SIGNATURE: _