

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -2 AM 8:32

DOCUMENT # N93000002605 (4)

1. Corporation Name

CYPRESS CREEK OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O J&M ASSOCIATES, INC.
1503 OAK ST
JACKSONVILLE FL 32204
US

C/O J&M ASSOCIATES, INC.
1503 OAK ST.
JACKSONVILLE FL 32204
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/04/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3192962

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

26

City & State

City & State

23

27

Zip

Country

Zip

Country

24

25

28

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

J & M ASSOCIATES INC
1503 OAK ST
JACKSONVILLE FL 32204

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DP

NAME

SMITH, DOUGLAS W

STREET ADDRESS

6620 SOUTHPOINT DR., S., STE. 400

CITY - ST - ZIP

JACKSONVILLE FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

DP

NAME

GEORGE STEVE

STREET ADDRESS

6620 SOUTHPOINT DR., S., STE. 400

CITY - ST - ZIP

JACKSONVILLE FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☒ Addition

DV

Greg Scoggins

924 majestic Cypress Drive N.

Atlantic Beach, FL 32233

TITLE

DST

NAME

PORTER, ROBERT

STREET ADDRESS

6620 SOUTHPOINT DR., S., STE. 400

CITY - ST - ZIP

JACKSONVILLE FL

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

~~Advocacy~~

~~Jennifer S. Hoffman~~

~~851 majestic Cypress Drive N.~~

~~Atlantic Beach, FL 32233~~

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

~~Advocacy~~

~~Tom W. H.~~

~~925 Gwynedd Road, Atlantic Beach, FL~~

~~32233~~

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 (if changed) or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Douglas W. Smith, President

Date

Daytime (Area #)

904-296-4551

1/23/95