

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004938

FILED
Apr 30, 2009
Secretary of State

Entity Name: CYPRESS TRACE NEIGHBORS, INC.

Current Principal Place of Business:

P.O. BOX 411121
MELBOURNE, FL 329411121 US

New Principal Place of Business:

1383 CYPRESS TRACE DRIVE
MELBOURNE, FL 329411121 US

Current Mailing Address:

P.O. BOX 411121
MELBOURNE, FL 329411121 US

New Mailing Address:

FEI Number: 59-3212621 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALE, DIANE
1204 CYPRESS TRACE DRIVE
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

OYER, KEN
1383 CYPRESS TRACE DRIVE
MELBOURNE, FL 32940 US

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: KEN OYER

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BALE, DIANE
Address: 1204 CYPRESS TRACE DR
City-St-Zip: MELBOURNE, FL 32940

Title: TD () Delete
Name: BRAVATA, WILMA
Address: 1382 CYPRESS TRACE DR
City-St-Zip: MELBOURNE, FL 32940

Title: SD () Delete
Name: ALVAREZ, ROSARY
Address: 1255 PALM GARDEN PLACE
City-St-Zip: MELBOURNE, FL 32940

Title: VPD () Delete
Name: SHEPARD, ANN
Address: 1270 PALM GARDEN PLACE
City-St-Zip: MELBOURNE, FL 32940

Title: VPD () Delete
Name: WRIGHT, THOMAS
Address: 1277 CYPRESS TRACE DR
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OYER, KEN
Address: 1383 CYPRESS TRACE DRIVE
City-St-Zip: MELBOURNE, FL 32940

Title: TD (X) Change () Addition
Name: HUYSMAN, II, DAVE
Address: 1261 CYPRESS TRACE DR
City-St-Zip: MELBOURNE, FL 32940

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVE HUYSMAN, II

TD

04/30/2009

Electronic Signature of Signing Officer or Director

Date