

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000867

FILED  
Jan 12, 2010  
Secretary of State

**Entity Name:** THE FOUNTAINS AT CYPRESS LAKES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2189 CLEVELAND ST  
SUITE 225  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

2189 CLEVELAND ST  
SUITE 225  
CLEARWATER, FL 33765

**New Mailing Address:**

**FEI Number:** 59-3233527

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEIGHTON, LENNARD A  
SEABORD ARBORS MANAGEMENT SVCS  
2189 CLEVELAND ST SUITE 225  
CLEARWATER, FL 33765 US

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

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:**

**Title:** VPD  
**Name:** BAHNSEN, SCOTT  
**Address:** 326 FOUNTAINVIEW CIRCLE  
**City-St-Zip:** OLDSMAR, FL 34677

**Title:** STD  
**Name:** JOHNSON, KATHLEEN  
**Address:** 325 FOUNTAIN CIR  
**City-St-Zip:** OLDSMAR, FL 34677

**Title:** D  
**Name:** SMITH, JAMES  
**Address:** 345 FOUNTAINVIEW CIRCLE  
**City-St-Zip:** OLDSMAR, FL 34677

**Title:** PD  
**Name:** DAVIS, MICHELLE  
**Address:** 338 WOODSPRING CT  
**City-St-Zip:** OLDSMAR, FL 34677

**Title:** D  
**Name:** DRONEY, RITA  
**Address:** 375 FOUNTAINVIEW CIR  
**City-St-Zip:** OLDSMAR, FL 34677

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:** MICHELLE DAVIS

P

01/12/2010

Electronic Signature of Signing Officer or Director

Date