

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003903

FILED
Feb 22, 2011
Secretary of State

Entity Name: CYPRESS HEAD RESIDENTIAL HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

6156 SABAL POINT CIRCLE
PORT ORANGE, FL 32128

New Principal Place of Business:

Current Mailing Address:

PO BOX 291282
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 59-3263115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOCH, KAREN
6156 SABAL POINT CIRCLE
PORT ORANGE, FL 32128 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: D
Name: COLE, PHIL
Address: 1078 CRYSTAL CREEK DRIVE
City-St-Zip: PORT ORANGE, FL 32128

Title: VP
Name: LEE, RICHARD
Address: 6393 LONGLAKE DRIVE
City-St-Zip: PORT ORANGE, FL 32128

Title: T
Name: TUTTLE, LYNN
Address: 6485 CYPRESS SPRINGS PARKWAY
City-St-Zip: PORT ORANGE, FL 32128

Title: PD
Name: STARK, WILLIAM H
Address: 6474 LONGLAKE DRIVE
City-St-Zip: PORT ORANGE, FL 32128

Title: SEC
Name: MESEROLL, NANCY L
Address: 6373 FAIRWAY COVE DRIVE
City-St-Zip: PORT ORANGE, FL 32128

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: WILLIAM STARK

PD

02/22/2011

Electronic Signature of Signing Officer or Director

Date