

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jun 17, 2005 8:00 am**  
**Secretary of State**

06-17-2005 90003 046 \*\*\*\*70.00

**DOCUMENT # N95000005240**

1. Entity Name

**CYPRESS WOODS COMMUNITY ASSOCIATION OF EAST LAKE, INC.**



Principal Place of Business

**36181 EAST LAKE ROAD  
#194  
PALM HARBOR FL 34685  
US**

Mailing Address

**36181 EAST LAKE ROAD  
#194  
PALM HARBOR FL 34685  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E037 (10/04)

4. FEI Number

**59-3345283**

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CRUM, DALE M P  
4906 FELICITY WAY  
PALM HARBOR FL 34685**

Name

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

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE: **PCT** ☐ Delete  
NAME: **CRUM, DALE**  
STREET ADDRESS: **4906 FELICITY WAY**  
CITY-ST-ZIP: **PALM HARBOR FL 34685**

TITLE: **D** ☐ Delete  
NAME: **STEWART, CHUCK**  
STREET ADDRESS: **4526 SERENITY TRAIL**  
CITY-ST-ZIP: **PALM HARBOR FL 34685**

TITLE: **D** ☐ Delete  
NAME: **WEBSTER, KEN**  
STREET ADDRESS: **3978 FELICITY WAY**  
CITY-ST-ZIP: **PALM HARBOR FL 34685**

TITLE: **SCT** ☐ Delete  
NAME: **HOVE, SELENE**  
STREET ADDRESS: **3437 SERENITY TRAIL**  
CITY-ST-ZIP: **PALM HARBOR FL 34685**

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: **PRESIDENT** ☒ Change ☐ Addition  
NAME: **CRUM, DALE**  
STREET ADDRESS: **4906 FELICITY WAY**  
CITY-ST-ZIP: **PALM HARBOR, FL 34685**

TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: **DIRECTOR** ☒ Change ☐ Addition  
NAME: **WEBSTER KEN**  
STREET ADDRESS: **4978 FELICITY WAY**  
CITY-ST-ZIP: **PALM HARBOR FL 34685**

TITLE: **SECRETARY** ☒ Change ☐ Addition  
NAME: **HOVE, SELENE**  
STREET ADDRESS: **4542 SERENITY TRAIL**  
CITY-ST-ZIP: **PALM HARBOR FL 34685**

TITLE: **TREASURER** ☐ Change ☒ Addition  
NAME: **DENISE SANDERSON**  
STREET ADDRESS: **4873 CYPRESS WOODS BLVD**  
CITY-ST-ZIP: **PALM HARBOR, FL 34685**

TITLE: ☐ Change ☐ Addition  
NAME: ☐ Change ☐ Addition  
STREET ADDRESS: ☐ Change ☐ Addition  
CITY-ST-ZIP: ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:

*Dale M. Crum - PRESIDENT*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*6/2/05*  
Date

*727-945-9363*  
Daytime Phone #

**ATTACHMENT**

**Cypress Woods**

40088505

**Community Association of East Lake, Inc.**

**36181 East Lake Rd., PMB #194**

**Palm Harbor, FL. 34685**

June 13, 2005

Florida Department of State  
Division of Corporations  
Annual Report Section  
P.O. Box 6850  
Tallahassee, FL. 32314

RE: Renewal for Document # N95000005240

To Whom It May Concern:

Please accept my apology for this renewal being late. Enclosed please find our renewal form along with a check for the appropriate amount for renewal or our corporate papers with the State of Florida. Please note the changes that have been made to the Board of Directors list.

Should you have any questions or if there are any additional fees or issues regarding this renewal, please do not hesitate to contact me at: 727-945-9363 or on my cell phone at 727-871-0541.

Sincerely,

*Dale M. Crum - President*

Cypress Woods Community Association of East Lake, Inc.  
By Dale M. Crum, as President