

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005931

FILED  
Mar 25, 2010  
Secretary of State

**Entity Name:** CYPRESS RESERVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5317 CYPRESS RESERVE PLACE  
WINTER PARK, FL 32792 US

**New Principal Place of Business:**

2848 BEAR ISLAND POINTE  
WINTER PARK, FL 32792 US

**Current Mailing Address:**

C/O LIGHTHOUSE MGMT. & CONSULTING  
PO BOX 0774  
WINDERMERE, FL 347860774

**New Mailing Address:**

**FEI Number:** 59-3363704      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PAUL L. WEAN  
646 EAST COLONIAL DR.  
ORLANDO, FL 32803 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: PD  
Name: KIRSCHNER, STEVEN  
Address: 2848 BEAR ISLAND POINTE  
City-St-Zip: WINTER PARK, FL 32792

Title: VPD  
Name: KENDALL, CHRIS  
Address: 5365 CYPRESS RESERVE PLACE  
City-St-Zip: WINTER PARK, FL 32792

Title: D  
Name: KLUSMAN, ROBERT  
Address: 5377 CYPRESS RESERVE PLACE  
City-St-Zip: WINTER PARK, FL 32792

Title: TD  
Name: MAYER, ELLEN  
Address: 2812 BEAR ISLANDS POINTE  
City-St-Zip: WINTER PARK, FL 32792

Title: SD  
Name: MASKIELL, SANDRA  
Address: 2844 BEAR ISLAND POINTE  
City-St-Zip: WINTER PARK, FL 32792

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: STEVEN KIRSCHNER

PD

03/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date