FILE NOW: FILING FEE IS \$61.25 NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State Secretary of State **1998 DIVISION OF CORPORATIONS DOCUMENT** # N97000003226 (4) CYPRESS CIVIC ASSOCIATION, INC. Mailing Address Principal Place of Business C/O BOB DAGLIAN C/O BOB DAGLIAN 3. Date incorporated or Qualified 230 SE 10 STREET 230 SE 10 STREET 06/04/1997 65 080 -8486 POMPANO BEACH FL 33060 POMPANO BEACH FL 33060 Applied For Not Applicable 2. Principal Place of Business Mailing Address \$8.75 Additional 5. Certificate of Status Desired 10 MADELYN BURROWS C/O MADELYN BURROWS Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5,00 May Be 1290 SE 1290 SE 3 TERRACE Trust Fund Contribution Added to Fees

POMPANO BEACH, FL 28 POMPANO BEACH	Y FZ . Yes No			
	Country U.S.A. 8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent			
	81 Name			
HELLER CAPITAL, INC. 1214 N UNIVERSITY DR	82 Street Address (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33322	83			
	84 City 85 Zip Code			

Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or hoth, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and a corporation of Section 617.0503, Florida Statutes.

	D Land Aldiver				4.21	. 48
SIGNATURE	Signatule, tyred or printogrname of registered agent and title if applic	abe (NOTE R	egistered Agent signatur	e required when reinstating) DATE		·····/
12.	OFFICERS AND DIRECTOR	S	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	S IN 12
TITLE	# PRESIDENT	☐ DELFTE	1.1 TITLE	TREASURER	Change	▼ Addition
NAME	Z aldivar, rene		1.2 NAME	1		
STREET ADDRESS	170 SE 12 STREET		1.3 STREET ADDRESS	MADELYN BURROWS 1290 SE 3 TERRACE		1
CITY-ST-ZIP	POMPANO BEACH FL 33060		1.4 CITY - ST - ZIP	POMPANO BEACH, FL. 33060		
TITLE	D	DELETE	2.1 TITLE	BOARD OF DIRECTORS	☐ Change	Addition !
NAME	LOWITT, ANNE		2.2 NAME	JOSEPH A MORRONGIELLO 831 SE 2" TERRACE		
STREET ADDRESS	1148 SW 1 TERRACE		2.3 STREET ADDRESS	831 SE 2 TERRACE	_	
CITY-ST-ZIP	POMPANO BEACH FL 33060		2.4 CITY-ST-ZIP	Pomposo Beach, FL 3306	0	
TITLE	0	DELETE	3.1 TITLE		Change	Addition
NAME	DA GLIAN, BOB		3.2 NAME			
STREET ADDRESS	230 SE 10 STREET	•	3.3 STREET ADDRESS			
CITY-ST-ZIP	POMPANO BEACH FL 33060		3.4. CITY - ST - ZIP	<u> </u>		
TITLE	SECRETHRY	DEFELE	4.1 TITLE		☐ Change	☐ Addition
NAME	DAVIS, SHELLE		4. 2 NAME			
STREET ADDRESS	230 SE 6 COURT		4.3 STREET ADDRESS			
CITY-ST-ZIP	POMPANO BEACH FL 33060		4.4 CITY-ST-ZIP			
TITLE	VICE PRESIDENT	DELETE	5.1 TITLE		Change	☐ Addition
NAME	THERESA GRUPPIN 1615W 10 th STREET		5.2 NAME			DE
STREET ADDRESS	1615W 10 TH STREET		5.3 STREET ADDRESS			6.19
CITY-ST-ZIP	Pempono Beach, FL 33060		5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			أسديا
CITY CT 7ID			6.4.01TV_ST_2IP		DEP. S	6125

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attacking the with an address.

421.98 (954) 784.0286

FILED

Jun 19 1998 8:00am