

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 91105 041 *****61.25

DOCUMENT # N97000006372

1. Entity Name

CYPRESS GLEN I CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

2073 J & C BLVD
 NAPLES FL 34109

Mailing Address

P O BOX 110339
 NAPLES FL 34108

BU045478



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3490782**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

~~ASHLEY, REX N~~
~~1044 CASTELLO DRIVE # 106~~
~~NAPLES FL 34109~~

Name **Beverly Kuetel**
 Street Address (P.O. Box Number is Not Acceptable)
410 Sunburst Manor Corp.
2073 J & C Blvd.
 City **NAPLES** FL Zip Code **34109**

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.

SIGNATURE

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

Beverly Kuetel

(NOTE: Registered Agent signature required when reinstating)

4/6/01
 DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DIAKOS, SYLVIA 3225 CYPRESS GLEN WAY # 116 NAPLES FL 34109	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST ASHLEY, REX N 3225 CYPRESS GLEN WAY # 112 NAPLES FL 34109	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV WEBB, ART 3225 CYPRESS GLEN WAY # 106 NAPLES FL 34109	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D.V.P Vetter ELLA JEAN 3225 CYPRESS GLENWAY #103 NAPLES, FL	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D.S.T Beerck Dorothy 3225 CYPRESS GLENWAY #107 NAPLES, FL	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS 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:

Sylvia Diakos
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-01 944-591-2040
 Date Daytime Phone #

CR2E037 (10/00)