2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004
Secretary of State

DOCUMENT# N97000006372

Entity Name: CYPRESS GLEN I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4306 ARNOLD AVE.
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

P O BOX 110339
NAPLES, FL 34108

New Mailing Address:

FEI Number: 59-3490782 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KUETER, BEVERLY
4306 ARNOLD AVE.
2073 J & C BLVD
NAPLES, FL 34104

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: DP ( ) Delete
Name: POTTER, JEFF
Address: 3225 CYPRESS GLEN WAY #109
City-St-Zip: NAPLES, FL 34109

Title: DV ( ) Delete
Name: BEERCK, DOROTHY
Address: 3225 CYPRESS GLEN WAY, STE 107
City-St-Zip: NAPLES, FL

Title: DST ( ) Delete
Name: WRIGHT, GEORGE
Address: 3225 CYPRESS GLEN WAY, #113
City-St-Zip: NAPLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: GASKILL, NATE
Address: 3225 CYPRESS GLEN WAY #111
City-St-Zip: NAPLES, FL 34109

Title: DV (X) Change ( ) Addition
Name: WRIGHT, GEORGE
Address: 3225 CYPRESS GLEN WAY, STE 113
City-St-Zip: NAPLES, FL

Title: DST (X) Change ( ) Addition
Name: NEWSWANGER, WENDY
Address: 3225 CYPRESS GLEN WAY, #112
City-St-Zip: NAPLES, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: NATE GASKILL DP 04/19/2004

Electronic Signature of Signing Officer or Director — Date