2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# N98000001119

Entity Name: CYPRESS COVE AT PELICAN STRAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

R & P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

R & P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104

New Mailing Address:

FEI Number: 65-0826833 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

R & P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 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 ( ) Delete
Name: PAUL, GEORGE
Address: 5633 WHISPERWOOD BLVD #703
City-St-Zip: NAPLES, FL 34110

Title: VPD ( ) Delete
Name: BRUNACCINI, JOSEPH
Address: 5629 WHISPERWOOD BLVD #804
City-St-Zip: NAPLES, FL 34110

Title: SD ( ) Delete
Name: KOEPKA, VERONICA
Address: 5644 SANDLEWOOD CT #1902
City-St-Zip: NAPLES, FL 34110

Title: TD ( ) Delete
Name: GETMAN, BUD
Address: 5637 WHISPERWOOD BLVD #604
City-St-Zip: NAPLES, FL 34110

Title: D ( ) Delete
Name: LUKEMAN, MICHAEL
Address: 5632 WHISPERWOOD BLVD #1604
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: GLENN CARROLL PRES 04/24/2006
Electronic Signature of Signing Officer or Director — Date