2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2000 8:00 am
Secretary of State
03-17-2000 90069 002 ****61.25

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1. Entity Name

CYPRESS LAKES HOMEOWNERS ASSOCIATION OF LAKELAND

Principal Place of Business	Mailing Address
10000 U.S. HIGHWAY 98 NORTH #303 LAKELAND FL 33809	10000 U.S. HIGHWAY 98 NORTH #303 LAKELAND FL 33809-8014

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2878564 ☐ Applied For ☐ Not Applicable

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
RESNICK, MICHAEL L 1342 E. VINE STREET SUITE 236 KISSIMMEE FL 34744	Name: MIA L. McKOWN, ESQ. Street Address (P.O. Box Number is Not Acceptable): TROIANO & ROBERTS, P.A. 317 S. TENNESSEE AVE. City: LAKELAND FL Zip Code: 33801-4617

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: Mia L. McKown Mia L. McKown 02-28-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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	D HUFF, MORGAN 10000 U.S. HIGHWAY 98 NORTH, #930 LAKELAND FL 33809	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT, BOARD OF DIR. LENNY NANGEL 10300 US 98N, # 1472 LAKELAND, FL 33809	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHALLACOMBE, STAN 10000 U.S. HIGHWAY 98 NORTH, #1062 LAKELAND FL 33809	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT, BOARD OF D DICK HOLZSCHUH 10000 US 98N, # 402 LAKELAND, FL 33809	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONES, TOM 10000 U.S. HIGHWAY 98 NORTH, #500 LAKELAND FL 33809	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER, BOARD OF DIR. CARSON SWARTZLANDER 10300 US 98N, # 1516 LAKELAND, FL 33809	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FICK, BOB 10000 U.S. HIGHWAY 98 NORTH, #1471 LAKELAND FL 33809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY, BOARD OF DIR. JEAN McCLUSKEY 10000 US 98N, # 400 LAKELAND, FL 33809	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WALSH, FRANK 10000 U.S. HIGHWAY 98 NORTH, #912 LAKELAND FL 33809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR, GINNY BARKER 10000 US 98N - # 938 LAKELAND, FL 33809	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ZIMMERMAN, CHUCK 10000 U.S. HIGHWAY 98 NORTH, #850 LAKELAND FL 33809	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR DICK BARKER 10000 US 98N, #938 LAKELAND, FL 33809	☒ 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: Carson E. Swartzlander Treasurer 3-14-00 (863) 859-4161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
CARSON E. SWARTZLANDER