APR-23-99 FRI 08:31 AM CYPRESS LAKE C C VILLAS

FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 15, 1999 8:00 am
Secretary of State
05-15-1999 90012 018 ***150.00

DOCUMENT # P93000031716

551401 - 90012 - 18

1. Corporation Name

Cypress Lake Country Club Villas, Inc.

Principal Place of Business

7011 Winkler Rd.
FT Myers, FL 33919

Mailing Address

7011 Winkler Rd.
FT Myers, FL 33919

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/27/93

4. FEI Number: 65-0404553 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

21 Principal Place of Business
22 Suite, Apt. #, etc.
23 City & State
24 Zip
25 Country

26 Mailing Address
27 Suite, Apt. #, etc
28 City & State
29 Zip
30 Country

9. Name and Address of Current Registered Agent

Memoli, Guy
7011 Winkler Rd.
FT Myers, FL 33919

10. Name and Address of New Registered Agent

81 Name: Aloia, Frank J.
82 Street Address (P.O. Box Number is Not Acceptable): 1716 Cape Coral Parkway
83
84 City: Cape Coral, FL
85 Zip Code: 33904

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Frank Franchi, VP — DATE: 4/26/99

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

CR2E034 (11/98)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP ☒ DELETE	1.1 TITLE	DP ☒ Change ☐ Addition
NAME	Memoli, Guy	1.2 NAME	Franchi, Pasquale
STREET ADDRESS	7011 Winkler Rd.	1.3 STREET ADDRESS	7011 Winkler Rd.
CITY-ST-ZIP	FT Myers, FL 33919	1.4 CITY-ST-ZIP	FT Myers, FL 33919
TITLE	DV ☒ DELETE	2.1 TITLE	DV ☒ Change ☐ Addition
NAME	Franchi, Pasquale	2.2 NAME	Franchi, Louis
STREET ADDRESS	7011 Winkler Rd.	2.3 STREET ADDRESS	7011 Winkler Rd.
CITY-ST-ZIP	FT Myers, FL 33919	2.4 CITY-ST-ZIP	FT Myers, FL 33919
TITLE	DST ☒ DELETE	3.1 TITLE	DST ☒ Change ☐ Addition
NAME	Memoli, Guy	3.2 NAME	Franchi, Patricia
STREET ADDRESS	7011 Winkler Rd.	3.3 STREET ADDRESS	7011 Winkler Rd.
CITY-ST-ZIP	FT Myers, FL 33919	3.4 CITY-ST-ZIP	FT Myers, FL 33919
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Frank Franchi, VP — Date: 4/26/99 — Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR