2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000031716

FRANCHI, PATRICIA

NATICK, MA 01760 US

182 W CENTRAL STREET

Name:

Address: City-St-Zip:

Entity Name: CYPRESS LAKE COUNTRY CLUB VILLAS, INC.

FILED Jun 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 182 W CENTRAL STREET SUITE 303 NATICK, MA 01760 **New Mailing Address: Current Mailing Address:** 182 W CENTRAL STREET SUITE 303 NATICK, MA 01760 FEI Number: 65-0404553 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALOIA, FRANK J **GARVIN & TRIPP** 1716 CAPE CORAL PKWY 2532 EAST FIRST STREET P.O. DRAWER 2040 CAPE CORAL, FL 33904 US FORT MYERS, FL 33902 US 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: THEODORE L. TRIPP 06/30/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FRANCHI, PASQUALE Name: Name: 182 W CENTRAL STREET Address: Address: City-St-Zip: NATICK, MA 01760 US City-St-Zip: () Delete Title: DV Title: () Change () Addition Name: FRANCHI, LOUIS Name: 182 W CENTRAL STREET Address: Address: NATICK, MA 01760 US City-St-Zip: City-St-Zip: Title: Title: DST () Delete () Change () Addition

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: PAASQUALE FRANCHI DP 06/30/2005