

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751987

Entity Name: THE CYPRESSWOOD GARDEN PATIO HOMES HOMEOWNERS' ASSOCIATION, INC.**FILED**
Mar 14, 2016
Secretary of State
CC6083779162**Current Principal Place of Business:**384 TROON CT.
WINTER HAVEN, FL 33884**Current Mailing Address:**P.O. BOX 1259
DUNDEE, FL 33838 US**FEI Number: 59-2057326****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LOCKWOOD, DOUGLAS A
STRAUGHN & TURNER, P.A.
255 MAGNOLIA AVE., S.W.
WINTER HAVEN, FL 33883 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	MCMILLAN, FRANK D
Address	384 TROON COURT
City-State-Zip:	WINTER HAVEN FL 33884

Title	VP
Name	LUCIEW, RICHARD B.
Address	399 TROON CT
City-State-Zip:	WINTER HAVEN FL 33884

Title	SECRETARY
Name	MAY, POLLY
Address	398 TROON COURT
City-State-Zip:	WINTER HAVEN FL 33884

Title	TREASURER
Name	LUCIEW, RICHARD
Address	399 TROON COURT
City-State-Zip:	WINTER HAVEN FL 33884

Title	DIRECTOR
Name	MEYER, DAVE
Address	PO BOX 1246
City-State-Zip:	DUNDEE FL 33838

Title	DIRECTOR
Name	THOMPSON, SYLVIA
Address	381 TROON CT
City-State-Zip:	WINTER HAVEN FL 33884

Title	DIRECTOR
Name	DI LORENZO, MARJORIE
Address	425 GLENEAGLES CT.
City-State-Zip:	WINTER HAVEN FL 33884

I hereby 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 all other like empowered.

SIGNATURE: RICHARD B LUCIEW**VP****03/14/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date