

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766070

**Entity Name:** CYPRESSVIEW ONE PROPERTY OWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 19, 2017**  
**Secretary of State**  
**CC0715995696**

**Current Principal Place of Business:**

3018 N. U.S. HIGHWAY 301  
950  
TAMPA, FL 33619

**Current Mailing Address:**

3018 N. U.S. HIGHWAY 301  
950  
TAMPA, FL 66319 US

**FEI Number: 59-2262425**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PILKA & ASSOCIATES, P.A.  
213 PROVIDENCE ROAD  
BRANDON, FL 33801-4976 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: DANIEL F. PILKA**

**04/19/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name ADKINS, RENEE VP  
Address 1602 COMFY COURT  
City-State-Zip: SUN CITY CENTER FL 33573

Title TREASURER  
Name MARCHESE, ANTONIA  
Address 1746 ATRIUM DRIVE  
City-State-Zip: SUN CITY CENTER FL 33573

Title PRESIDENT  
Name CESAREK, BOBBIE  
Address 1758 ATRIUM DRIVE  
City-State-Zip: SUN CITY CENTER FL 33573

Title D  
Name BAGLEY, ROY  
Address 1740 ATRIUM DRIVE  
City-State-Zip: SUN CITY CENTER FL 33573

Title SECRETARY  
Name CARGILL, LANCE  
Address 5342 APLEWOOD CLOSE  
City-State-Zip: ROCKFORD IL 61114

*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: BOBBIE CESAREK**

**PRESIDENT**

**04/19/2017**

Electronic Signature of Signing Officer/Director Detail

Date