

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03809

Entity Name: CYPRESS LAKE ESTATES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O MYTOWN COMMUNITIES
2830 WINKLER AVE #101
FT MYERS, FL 33916

Current Mailing Address:

C/O MYTOWN COMMUNITIES
2830 WINKLER AVE #101
FT MYERS, FL 33916 US

FEI Number: 59-2891806

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KNOX LEVINE, P.A.
36354 U.S. HWY 19 N.
PALM HARBOUR, FL 34684 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: BRYAN B. LEVINE, ESQ.

04/26/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name JACKSON, HERBERT
Address C/O MYTOWN COMMUNITIES
 2830 WINKLER AVE #101
City-State-Zip: FT MYERS FL 33916

Title TREASURER, SECRETARY
Name FITZGIBBONS, LISA
Address C/O MYTOWN COMMUNITIES
 2830 WINKLER AVE #101
City-State-Zip: FT MYERS FL 33916

Title DIRECTOR
Name DECKER, PAMELA
Address C/O MYTOWN COMMUNITIES
 2830 WINKLER AVE #101
City-State-Zip: FT MYERS FL 33916

Title DIRECTOR
Name FIKE, BARRY
Address C/O MYTOWN COMMUNITIES
 2830 WINKLER AVE #101
City-State-Zip: FT MYERS FL 33916

Title VP
Name HUINT, LAWRENCE
Address C/O MYTOWN COMMUNITIES
 2830 WINKLER AVE #101
City-State-Zip: FT MYERS FL 33916

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: HERBERT JACKSON

PRESIDENT

04/26/2024

Electronic Signature of Signing Officer/Director Detail

Date