

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004013

Entity Name: THE VILLAGE AT CYPRESS CREEK HOMEOWNERS ASSOCIATION, INC.

FILED
Feb 01, 2019
Secretary of State
0000499714CC

Current Principal Place of Business:

900 HEARTWOOD CYPRESS DRIVE
WINTER HAVEN, FL 33881

Current Mailing Address:

P.O. BOX 158
DUNDEE, FL 33838

FEI Number: 20-8915753

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLLING, LEE J
529 VERSAILLES DR., SUITE 103
MAITLAND, FL 32751 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 KEPNER, NORMA
Address P.O. BOX 158
City-State-Zip: DUNDEE FL 33838

Title VP
Name AMBROSI, SAM
Address P.O. BOX 158
City-State-Zip: DUNDEE FL 33838

Title TREASURER
Name CLEVELAND, SCOTT
Address P.O. BOX 158
City-State-Zip: DUNDEE FL 33838

Title SECRETARY
Name WILSON, ROBERT
Address P.O. BOX 158
City-State-Zip: DUNDEE FL 33838

Title SGT.AT ARMS
Name ROUTOLO, DENISE
Address P.O. BOX 158
City-State-Zip: DUNDEE FL 33838

Title DIRECTOR
Name CONGDON, NANCY
Address P.O. BOX 158
City-State-Zip: DUNDEE FL 33838

Title DIRECTOR
Name SEWARD, KEVIN
Address P.O. BOX 158
City-State-Zip: DUNDEE FL 33838

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: ROBERT WILSON

SECRETARY

02/01/2019

Electronic Signature of Signing Officer/Director Detail

Date