### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000006156

Entity Name: ALGK CYPRESS OFFICE PARK OWNERS' ASSOCIATION, INC.

**FILED** Feb 05, 2024 **Secretary of State** 3625612435CC

# **Current Principal Place of Business:**

4423 N.W. 6TH PL. GAINESVILLE, FL 32607

### **Current Mailing Address:**

4423 N.W. 6TH PL.

GAINESVILLE, FL 32607

FEI Number: 82-4746119 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

ALFINO, PAUL A 4423 N.W. 6TH PL. GAINESVILLE, FL 32607 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

	Title	D	Title	P/AS
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ALFINO, PAUL A ALFINO, PAUL A Name Name 4423 N.W. 6TH PL. 4423 N.W. 6TH PL. Address Address

City-State-Zip: GAINESVILLE FL 32607 GAINESVILLE FL 32607 City-State-Zip:

Title AS Title D/VP

Name GEORGE, SATHISH GEORGE, SATHISH Name Address 4423 N.W. 6TH PL. Address 4423 N.W. 6TH PL. GAINESVILLE FL 32607 City-State-Zip: GAINESVILLE FL 32607

Title AS/T D/VP Title

Name LOPEZ-NIETO, CARLOS LOPEZ-NIETO, CARLOS Name Address 4423 N.W. 6TH PL. 4423 N.W. 6TH PL. Address

City-State-Zip: GAINESVILLE FL 32607 City-State-Zip: GAINESVILLE FL 32607

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: PAUL ALFINO MD

02/05/2024 D