

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17752

Entity Name: CYPRESS BEND CONDOMINIUM VI ASSOCIATION, INC.**Current Principal Place of Business:**2217 CYPRESS ISLAND DR.
SUITE 102
POMPANO BEACH, FL 33069**Current Mailing Address:**2217 CYPRESS ISLAND DR.
SUITE 102
POMPANO BEACH, FL 33069 US**FEI Number: 59-2743450****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MCDONALD, DOUG
2217 CYPRESS ISLAND DRIVE
SUITE 102
POMPANO BEACH, FL 33069 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	VP
Name	DICEMBRE, ANNA
Address	2217 CYPRESS ISL DR, #505
City-State-Zip:	POMPANO BEACH FL 33069

Title	P
Name	PETERS, BARBARA
Address	2217 CYPRESS ISL DR, # 205
City-State-Zip:	POMPANO BEACH FL 33069

Title	T
Name	MCDONALD, DOUGLAS
Address	2217 CYPRESS ISLAND DR #102
City-State-Zip:	POMPANO BEACH FL 33069

Title	S
Name	MARCIANO, DANIEL
Address	2217 CYPRESS ISL DR, # 707
City-State-Zip:	POMPANO BEACH FL 33069

Title	B
Name	STERNER, JOANNE
Address	2215 CYPRESS ISLAND DR #603
City-State-Zip:	POMPANO BEACH FL 33069

Title	B
Name	DECARLO, EVERETT
Address	2221 CYPRESS ISLAND DR UNIT 507
City-State-Zip:	POMPANO BEACH FL 33069

Title	MEMBER
Name	HOLLADAY, RICHARD MR
Address	2221 CYPRESS ISLAND DRIVE UNIT 901
City-State-Zip:	POMPANO BEACH FL 33069

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: DOUGLAS MCDONALD**TREASURER****01/13/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date