

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000052831

Entity Name: CYPRESS VILLAGES LLC

Current Principal Place of Business:

4301 VERONICA SHOEMAKER BLVD
FORT MYERS, FL 33916

Current Mailing Address:

4301 VERONICA SHOEMAKER BLVD
FORT MYERS, FL 33916

FEI Number: 20-2909436

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SILVER, KEITH MCPA
5235 RAMSEY WAY
SUITE 17
FORT MYERS, FL 33907 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

Authorized Person(s) Detail :

Title MGRM
Name QUATTRONE, ALFRED
Address 4301 VERONICA SHOEMAKER BLVD
City-State-Zip: FORT MYERS FL 33916

Title MGRM
Name PASCUCCI, JAMES
Address 3420 CARLTON LANE
City-State-Zip: DAVIE FL 33330

Title MGRM
Name QUATTRONE, LISA
Address 4301 VERONICA SHOEMAKER BLVD
City-State-Zip: FORT 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LISA QUATTRONE

MGRM

02/05/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date