

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91128 001 ***300.00

DOCUMENT # 228591 1. Entity Name CYPRESS LAKE REALTY, INC.					
Principal Place of Business 6767 WINKLER RD FT MYERS, FL 33919			Mailing Address 6767 WINKLER RD FT MYERS, FL 33919		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-0969110.	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent VIDUSSI, DANA 15237 BRIARCREST CIRCLE FORT MYERS, FL 33912				7. Name and Address of New Registered Agent Name JOHANSSON, LINDAS Street Address (P.O. Box Number is Not Acceptable) 13812 PINE VILLA LN City FORT MYERS FL Zip Code 33912	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>[Signature]</i> DATE 4/22/04 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VIDUSSI, DANA 15237 BRIARCREST CIRCLE FT MYERS, FL 33919	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PANKOW, JACK P 3856 HIDDEN ACRES CIR NORTH FORT MYERS, FL 33903	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHANSSON, LINDA S 13812 PINE VILLA LA FORT MYERS, FL 33912	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NACK, JOHN E 9731 MAR LARGO CIR. FORT MYERS, FL 33919	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T NACK, JOHN E 9731 MAR LARGO CIRCLE FT. MYERS, FL 33919	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOHANSSON, LINDA S 13812 PINE VILLA LN FORT MYERS, FL 33912	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PANKOW, JACK P 3856 HIDDEN ACRES CIRCLE N FORT MYERS, FL 33903	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HEFFERNAN, JOSEPH F 8851 KING LEAR COURT FORT MYERS, FL 33908	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 4/22/04 Daytime Phone # 481-1333		