FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE



FLORIDA DEPARTMENT OF STATE

FILED

Feb 04 1997 8:00am

Secretary of State

RACHEL K. WALSH 1/30/97 943-0 886

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 259635

(1)

1. Corporation Name CYPRESS LAKE NO 10, INC. Principal Place of Business Mailing Address 1411 S E 9TH AVE POMPANO BEACH FL 33060 Mailing Address 1411 S E 9TH AVE POMPANO BEACH FL 33060			060-9555				
					3. Date Incorporated or Qualified 06/05/1962	3a. Date of Last Report 01/24/1996	
2, Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21		26 Suite Act # etc		59-1447940	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
23		28		Trust Fund Contribution	Added to Fees		
Zip	Country Zip		Country		8. This corporation has liability fo		
24	25					Yes No	
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New F	tegistered Agent	
	SH, RACHEL K		01				
1411 SE 9TH AVE POMPANO BCH FL 33060			82	Street Add	ddress (P.O. Box Number is Not Acceptable)		
PUM	PANU DUN FL 33000		83	<u> </u>			
		ı					
			B4	City		FL 85 Zip Code	
11. Pursuant t	o the provisions of Sections 607,050	2 and 607.1508, Florida Stat	rtes, the abov	e-named corp	poration submits this statement for the	purpose of changing its registered	
office or ਸ agent ਪ ਲ	egistered at ent, or both in the State in familiar with, and accept the oblig	of Florida. Such change was anous of Society 0505	i authorized b Florjda Statute	y the corpora s.	poration submits this statement for the fion's board of directors. I hereby acc	ept the appointment as registered	
SIGNATURE	Sachel &	Walsh	/ RACI	HEL A	Y. WALSH	1/30/97	
	Signative is problemorable of registried age			ent signature requi	red when reinstating)	DATE	
12.	OFFICERS AN	D DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF	Change Addition	
NAME	WALSH, RACHEL K	_ occen	1.2 NAME			C Charge C Addition	
STREET ADDRESS	1411 SE 9TH AVE			T ADDRESS			
City - St - ZiP	POMPANO, FL 00000		1.4 CITY-				
TITLE			2.1 TITLE			Change Addition	
NAME	BRUPBACHER, DOROTHY		2.2 NAME				
STREET ADDRESS	1411 SE 9TH AVENUE		2.3 STREET ADDRESS				
CITY - ST - ZIF	POMPANO FL		2 4 CITY-	ST-ZIP			
TITLE	S S S S S S S S S S S S S S S S S S S	DELETE 31				Change	
NAME OTOGET AUDOLOG	AAAA OF OTH ANE		32 NAME				
STREET ADDRESS CITY-ST-ZIP	POMPANO FL		3.4. CITY -	T ADDRESS			
TITLE	1	DELETE	4.1 TITLE	DI-TIL		Change Addition	
NAME	LEINBACH, ELLEN	heart	4. 2 NAME				
STREET ACCRESS	1411 SE 9TH AVENUE		4.3 STREE	T ADDRESS			
CHTY-ST-ZIF	POMPANO FL		4,4 CITY -	ST-ZIP			
JITLE		☐ DELETE	5.1 TITLE		 .	Change Addition	
NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-S1-ZIF TITLE		DELETE	5.4 CITY - 6.1 TITLE	S1-ZIP		Change Addition	
NAME		where it	6.2 NAME				
STREET ADDRESS			- 1	T ADDRESS			
CITY-ST-ZIP			6.4 CITY-	ST-ZIP			
	by certify that the information supplie	d with this filing does not qui	differ for the out	omplion state	d in Section 119.07(3)(i), Florida Statu	ites. I further certify that the	
Lam an of appears	flicer or director of the emporation of n Block 12 or Block 13 if changed, o	r the reodiver or trustee emper ir on an altachment with an a	owered to exe others	cute this repo	t my signature shall have the same let it as required by Chapter 607, Florida	a Statutes; and that my name	