

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

4/ **FILED**
Apr 28, 2008 8:00 am
Secretary of State

04-02-2008 90017 050 ****61.25

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1st MOORE CR2E037 (10/07)

DOCUMENT # 713597 1. Entity Name CYPRESS LAKE EAST #4, INC.					
Principal Place of Business 711 S.E. 7TH AVENUE POMPANO BEACH FL 33060			Mailing Address 711 S.E. 7TH AVENUE POMPANO BEACH FL 33060		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent MILLS, VERNON B 711 SE 7TH AVE APT 1 POMPANO BEACH FL 33060				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature is required when appointing)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to: Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D INGRAM, DONALD C 711 SE 7TH AVE #10 POMPANO BEACH FL 33060 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PRESIDENT FINN, PATRICIA 711 SW 7TH AVE 5 POMPANO BEACH FL 33060 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PRESIDENT MILLS, VERNON B 711 SE 7TH AVE #1 POMPANO BEACH FL 33060 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TREASURER MILLS, JEANNE E 711 SE 7TH AVE #1 POMPANO BEACH FL 33060 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SECRETARY BLOCK, SHARON 711 SE 7TH AVE 7 POMPANO BEACH FL 33060 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIRECTOR JOHNSON, MARY 711 SE 7TH AVE #6 POMPANO BEACH 33060 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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, trustee empowered to execute this report as required by Chapter 617, 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: <u><i>Vernon B Mills</i></u> VERNON B MILLS (PRES.) 3/20/08 954-9441-7141 SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					