FILE NOW: FILING FEE IS \$61.25



NONPROFIT CORPORATION ANNUAL REPORT 1997			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS				May 07 1997 8:00am Secretary of State					
·	MENT #	723870		(2)								
CYPRE	SS LAKE NO.	8, INC.										
Principal Place	e of Business		Mailing Addr	ess								DIN BIRNIN ISBN
751 S.E. 15TH STREET POMPANO BEACH FL 33060-9441 751 S.E. 15TH STREET POMPANO BEACH FL 33060-9441												
									3. Date Incorporated or Qualified 05/23/1962	3a. Dat	e of Last Re 14/22/199	eport 6
2. Principal Pl	lace of Business		2a, Mailing A	ddress					4. FEI Number 59-1026455		——————————————————————————————————————	plied For t Applicable
Suite, Apt.	#, etc.		Suite, Ap	i. #, etc.					5. Certificate of Status Desired		\$8.75 / Fee Re	1
City & State	9		City & Sta	ite					6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip 24	25 Co	ountry	Zip 29		30 Cou	intry			8. This corporation has liability for Florida Statutes	ntangible t Yes	ax under s. No	199.032,
	9. Name and A	ddress of Current R	egistered Age	nt					10. Name and Address of New Re	gistered A	gent	
	GEORGE					81	Name Street A	ddres:	s (P.O. Box Number is Not Acceptal	le)		
	15TH ST	nan				83						
PUMPAN	IO BEACH FL 33	060					<u>.</u>		······································		T 1 = .	
						84	City			FL		Code
11. Pursuant to office or re	to the provisions of egistered agent, or	Sections 617.0502 at both, in the State of I accept the obligation	nd 617.1508, F Florida, Such c	lorida Statule hange was a	s, the a	bove d by	named corpo	corpora oration	ation submits this statement for the p is board of directors. I hereby accep	urpose of t the appo	changing it intment as	s registered registered
agent i ai SIGNATURE	m ramiliar with, and	accept the obligation	ris of, Section t	117.03 03 , FID	riua Sta	wes.	•					1
	Signature, typed or printer	name of registered agent an		(NOTE		d Agen	t signature ra	aquired (when reinstating)	DATE	DIDECTOR	C. IN. 40
12.	PD	OFFICERS AND D		DELETE	13. 1.1 Tr	TI E			ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	STEPHAN, RIC	CHARD	! -	1 DECEME	1.2 N		- 1			'		
STREET ADORESS	761 SE 15TH					1.3 STREET ADDRESS						
CITY-ST-ZIP	POMPANO BE	ACH FL]			1.4 CITY-ST-ZIP						}
TITLE	VD DE				E 2.1 TITLE						Change	☐ Addition
NAME	CARR,KATHLEEN				2.2 NAME							- 1
STREET ADDRESS	BELIEFE BELOUE				2.3 STF							1
CITY-ST-ZIP TITLE	D	AOITE		DELETE	3.1 T	TLE	1 · ZIP				Change	Addition
NAME	PATE, W. G.		_		32 N		Ì			•		
STREET ADORESS	751 SE 15TH	ST			1		ADDRESS					[
CITY-ST-ZIP	POMPANO BE	ACH FL			3.4. 0	ity-si	r - ZIP					
TOTLE	ST	arat II		DELETE	4.1 🏋		ļ			ı	Change	Addition
NAME	WHITNEY, RO				4.21							j
STREET ADDRESS	715 S.E. 15TH POMPANO BE						ADDRESS					
CITY-ST-ZIP TITLE	T	AUTI L		DELETE	5.1 T	ITY-ST TLE	-217				Change	Addition
NAME	NAHAS, GEO	RGE		-	5.2 N]		e e	•		
STREET ADDRESS	761 SE 15TH						ADDRESS					
CITY-ST-ZIP	POMPANO BE	ACH FL			5.4 C	ITY - ST	-ZIP					
TITLE	PD			DELETE	6.1 T		T				Change	Addition
NAME	HELM, CHERY				6.2 N							
STREET ADDRESS	761 SE 15TH				6.3 S	TREET A	NDDRESS .					1

14. I do 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 annual report or supplemental annual report is the 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

954- 781-9013 Daytime Phone # 0025291

FILED