FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT #

(2)

FILED					
May 05	1998	8:00am			
Secreta	ary of	State			

CYPRE	ESS LAKE NO. 8, INC.				
Principal Plac	e of Business	Mailing Address		A SANDIN I BASA SIBAN INTEL IBUN INTEL IBUN INTER	DIBIT STATE BIBIT BIBIT BIBIT BIBIT HADD
751 S.E. 15TH POMPANO BEA	STREET ICH FL 33080-9441	751 S.E. 15TH STREET POMPANO BEACH FL 33080-	9441	Date Incorporated or Qualified 05/23/1962 FEI Number	Applied For
2 Principal P	lace of Business	2a. Malling Address		59-1026455	Not Applicable
21	IRCA OL DIZEMBES	26 Mailing Address		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Ap1.	#, etc.	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be
22		27			Added to Fees
City & Stat	6	City & State		7. Is this nonprofit corporation a hom	
Zip	Country	Zip	Country	8. This corporation owes or has paid	
24	25	29 3	0	Personal Property Tax due June 30). Yes Links
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Regis	stered Agent
	ATA-A-		81 Name C	indu M. Dean	
NAHAS, GEORGE 761 S.E. 15TH ST			82 Street Addr	ress (P.O. Box Number is Not Acceptable	Unit Y
	NO BEACH FL 33060		83	0	<u> </u>
			B4 City	npanu Beach	85 Zip Code
					FL 33060
11. Pursuant office or r	to the provisions of Sections 617.05/ registered agent, or both, in the State	02 and 617.1508, Florida Statutes e of Florida. Such change was au	 the above-named corp thorized by the corporat 	poration submits this statement for the pur tion's board of directors. I hereby accept t	pose of changing its registered the appointment as registered
agent. I a	m familiar with, and accept the oblig	pations of Section 617.0503, Florid	da Statutes.	11. 11.	4/18/00
SIGNATURE .	Signature, typed or priorbit name of registared ag	Un Infasurer ent and title if applicable. (NOTE: F	Registered Agent signatura requir	red when reinstating)	7/28/48 DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	STEPHAN, RICHARD		1.2 NAME		
STREET ADDRESS	761 SE 15TH ST. POMPANO BEACH FL		1.3 STREET ADDRESS		
CITY-S1-ZIP TITLE	VD	DELETE	1.4 CITY-ST-ZIP		Change Addition
NAME	CARR.KATHLEEN	_	2.2 NAME		
STREET ADDRESS	751 SE 15TH ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL	T Deleve	2. 4 CITY-ST-ZIP		
TITLE	D DATE W.O.	DELETE	3.1 TITLE		Change Addition
NAME STREET ADDRESS	PATE, W. G. 751 SE 15TH ST		3.2 NAME 3.3 Street address		
CITY-ST-ZIP	POMPANO BEACH FL		3.4. CITY-ST-ZIP		
TITLE	ST	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	WHITNEY, ROBERT M.		4. 2 NAME		
STREET ADDRESS	715 S.E. 15TH ST.	<u>.</u>	4.3 STREET ADDRESS	•	
CITY-ST-ZIP TITLE	POMPANO BEACH FL	D DELETE	4.4 CITY-ST-ZIP 5.1 TIYLE	0 1 2	Change Addition
NAME	NAHAS, GEORGE	file occur	5.2 NAME	Cindy M. Dean 41 E. McNab Road Un	.+4
STREET ADDRESS	761 SE 15TH ST		5.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL		5.4 CITY-ST-ZIP	ompano Beach, FL 33.	
TITLE	PD	☐ DELETE	6.1 TITLE		Change Addition
NAME	HELM, CHERYL		6.2 NAME		
STREET ADDRESS	761 SE 15TH ST. POMPANO BEACH FL		6.3 STREET ADDRESS		
14. I hereby o		vith this filing does not qualify for	6.4 CITY-ST-ZIP the exemption stated in	Section 119.07(3)(i), Florida Statutes. I fur	ther certify that the information

indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. 204

SIGNATURE:

768-8924