


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005 8:00 am
Secretary of State

01-12-2005 90008 048 ***158.75

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DOCUMENT # P04000151812			
1. Entity Name WEST CYPRESS GROUP, INC.			
Principal Place of Business 4532 WEST KENNEDY BLVD. 112 TAMPA, FL 33609		Mailing Address 4532 WEST KENNEDY BLVD. 112 TAMPA, FL 33609	
2. Principal Place of Business 3415 West Cypress Street Suite, Apt. #, etc.		3. Mailing Address 3415 West Cypress Street Suite, Apt. #, etc.	
City & State Tampa, Florida		City & State Tampa, Florida	
Zip 33607	Country Hills.	Zip 33607	Country Hills
4. FEI Number 43-2065018		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		01062005 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent BELSHAW, PAUL P 4532 WEST KENNEDY BLVD. 112 TAMPA, FL 33609		7. Name and Address of New Registered Agent Name Paul P. Belshaw Street Address (P.O. Box Number is Not Acceptable) 3415 West Cypress Street City Tampa FL Zip Code 33607	
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 <u>Paul P. Belshaw</u> DATE <u>1-10-05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 FRACARO, RICHARD A 32 BARTHOLF AVENUE POMPTON LAKES, NJ 07442 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TENNY, STEVEN J 4532 WEST KENNEDY BLVD., SUITE 112 TAMPA, FL 33609 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VE/D Steven S. Tenny 3415 W. Cypress Street Tampa, FL 33607 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA BELSHAW, PAUL P 4532 WEST KENNEDY BLVD., SUITE 112 TAMPA, FL 33609 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Paul P. Belshaw 3415 W. Cypress Street Tampa, FL 33607 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC LOVINGER, MARC S 4532 WEST KENNEDY BLVD., SUITE 112 TAMPA, FL 33609 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D MARC S. Lovinger 3415 W. Cypress Street Tampa, FL 33607 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Algo W. 1213 53 N. Moore St #40 New York, NY 10013 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Paul P. Belshaw</u>		Date <u>1-10-05</u> Daytime Phone # <u>813-258-6440</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	

EX 229

ATTACHMENT

DONNELLY & RUSSO, P.A.

ATTORNEYS AT LAW

3708 W. EUCLID AVENUE, TAMPA, FLORIDA 33629

DO400151812

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SEAN V. DONNELLY*
JOSEPH C. RUSSO
*ALSO ADMITTED IN ILLINOIS

(813) 832-9790 PHONE
(813) 832-9739 FAX

January 11, 2005

Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Re: Annual Report: West Cypress Group, Inc.

To Whom It May Concern:

This firm represents West Cypress Group, Inc., in the referenced matter. Enclosed please find its 2005 Annual Report form, along with a check in the amount of \$158.75 for the filing.

Upon filing, please send to me, at the address above, the Certificate of Status.

Thank you for your attention to this matter. Please feel free to contact me if you have any questions.

Sincerely,


Joseph C. Russo

JCR
Enc.