2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 228591

Entity Name: CYPRESS LAKE REALTY, INC.

FILED Apr 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6767 WINKLER RD FT MYERS, FL 33919

Current Mailing Address: New Mailing Address:

6767 WINKLER RD FT MYERS, FL 33919

FEI Number: 59-0969110 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BVOGESS, BLAINE A
506 CORBEL DRIVE
NAPLES, FL 34110 US

BURGESS, BLAINE A
506 CORBEL DRIVE
NAPLES, FL 34110 US

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.

SIGNATURE: BLAINE A. BURGESS 04/23/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition STEWART, CHARLES A HEFFERNAN, JOSEPH F Name: Name: 8881 NEW CASTLE DR 8851 KING LEAR CT. Address: Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: FORT MYERS, FL 33908

ку-ок-zip. Токт мтеко, те зовоб оку-ок-zip. Токт мтеко, те зовоб

Title: VP () Delete Title: VP (X) Change () Addition Name: MITCHELL, BONNIE M Name: WINTER, KEVIN M

Address: 1442 EL DORADO PARKING WEST Address: 7270 SWAN LAKE DRIVE
City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: FORT MYERS, FL 33919

Title: T () Delete Title: T (X) Change () Addition

 Name:
 HEFFERNAN, JOSEPH F
 Name:
 HOWLETT, LARAINE A

 Address:
 8851 KING LEAR CT.
 Address:
 13613 ADMIRAL CT

 City-St-Zip:
 FORT MYERS, FL 33908
 City-St-Zip:
 FORT MYERS, FL 33912

Title: () Delete Title: (X) Change () Addition HOWLETT, LARAINE THORNDIKE, WILLIAM A Name: Name: Address: 13613 ADMIRAL CT Address: 11471 COMPASS POINT DRIVE City-St-Zip: City-St-Zip: FORT MYERS, FL 33912 FORT MYERS, FL 33905

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARAINE A. HOWLETT TRES 04/23/2008