

259635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

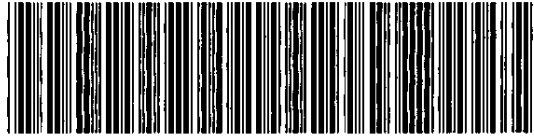
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TALLAHASSEE, FLORIDA
10 MAY -6 AM 8:42

R.A. Rolch
10 5/6/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CYPRESS LAKE NO. 10, Inc.
Name of Corporation

DOCUMENT NUMBER: 259635

✓ The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LOIS GUILBEAU / TREASURER
Name of Contact Person

CYPRESS LAKE NO. 10, Inc.
Firm/Company

1411 SE 9 Ave #2
Address

POMPANO BEACH, FL 33060
City/State and Zip Code

LEGUILBEAU@Bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LOIS GUILBEAU at (954) 461-6754
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 29, 2010

LOIS GUILBEAU
CYPRESS LAKE NO 10, INC.
1411 SE 9TH AVE #2
POMPANO BEACH, FL 33060

SUBJECT: CYPRESS LAKE NO 10, INC.
Ref. Number: 259635

We have received your document for CYPRESS LAKE NO 10, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 010A00010712

RECEIVED
JUN -6 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CYPRESS LAKE NO. 10, INC.
2. The principal office address: 1411 SE 9 Ave
Pompano Beach, FL 33060
3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 4-5-62 Document number: 259635
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

- Beverly Redgate
1411 SE 9 Ave #1
Pompano Bch FL 33060
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Lynn Brown
1411 SE 9 Ave #4
Pompano Beach, FL 33060

P.O. Box NOT acceptable

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TALLAHASSEE, FLORIDA
10 MAY - 6 AM 8:42

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Lois E. Guilbeau
Signature of an officer or director

LOIS E GUILBEAU
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Lynn Brown
Signature of Registered Agent

4/26/10
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)