

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

①

97 NOV 21 PM 3:20

DOCUMENT # 290475 (3)
1. Corporation Name
CYPRESS CONSTRUCTION COMPANY OF WINTER HAVEN

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
P.O. BOX 44
CYPRESS GARDENS FL 33884

Mailing Address
451 HWY 27 S
LAKE HAMILTON FL 33851

3. Date Incorporated or Qualified
03/01/1965

3a. Date of Last Report
05/26/1995

2. Principal Place of Business

2a. Mailing Address

21 463 US Hwy 27 South
Suite, Apt. #, etc.

26 P.O. Box 44
Suite, Apt. #, etc.

22 LAKE HAMILTON, FLORIDA
City & State

27
City & State

23
City & State

28 CYPRESS GARDENS, FL
City & State

24 33851
Zip

29 33884
Zip

25 Polk
Country

30 Polk
Country

4. FEI Number
59-1822361

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUNLSP, GEORGE
205 W. MAIN
BARTOW FL 33830

11 Name

12 Street Address (P.O. Box Number is Not Acceptable)

13

14 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature is required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME STRNAD, ROLAND
STREET ADDRESS 3828 GAINES COVE
CITY-ST-ZIP WINTER HAVEN FL ☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME STRNAD, INEZ I.
STREET ADDRESS 3828 GAINES COVE
CITY-ST-ZIP WINTER HAVEN FL ☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME STRNAD, GARY D.
STREET ADDRESS 3828 GAINES COVE
CITY-ST-ZIP WINTER HAVEN FL ☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TV
NAME STRNAD, DAN A.
STREET ADDRESS P.O. BOX 44
CITY-ST-ZIP CYPRESS GARDENS FL 33884 ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-19-97 (941) 439-4871

Date

Day the Filing is Made

CYPRESS CONSTRUCTION COMPANY

OF WINTER HAVEN
Established 1962

(2)
P.O. Box 44
Cypress Gardens, FL 33884
Phone: (941) 439-4871
Fax: (941) 439-6916

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

November 19, 1997

Dear Sir/Madam;

It has been brought to my attention, that we have not received your 1997 Profit Corporation Annual Report. Enclosed please find a copy along with a check for \$165.00 to reinstate Cypress Construction Company of Winter Haven. The original was either lost in the mail or returned back to you. The mailing address showing on the past two years has been incorrect. We do not have mail delivery at our physical address, that is why we have to have a post office box.

Principal Place of Business Change:

463 US Hwy. 27 South
Lake Hamilton, FL 33851

Mailing Address:

P.O. Box 44
Cypress Gardens, FL 33884

Respectfully,



Ivy Stewart/Secretary