# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 14, 2009**
**Secretary of State**

DOCUMENT# 290475

**Entity Name:** CYPRESS CONSTRUCTION COMPANY OF WINTER HAVEN

**Current Principal Place of Business:**

46 BREAM STREET
HAINES CITY, FL 33844

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 719
LAKE HAMILTON, FL 33851 US

**New Mailing Address:**

46 BREAM STREET
HAINES CITY, FL 33844

**FEI Number: 59-1822361** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

STRNAD, GARY P
46 BREAM STREET
HAINES CITY, FL 33844 US

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

STRNAD, GARY D
46 BREAM STREET
HAINES CITY, FL 33844 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: GARY D. STRNAD 03/14/2009
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: STRNAD, GARY D.
Address: 46 BREAM ST
City-St-Zip: HAINES CITY, FL 33844

Title: ST ( ) Delete
Name: STRNAD, KAREN
Address: 46 BREAM ST
City-St-Zip: HAINES CITY, FL 33844

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: GARY D. STRNAD P 03/14/2009
Electronic Signature of Signing Officer or Director Date