

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 293726

FILED
Jan 25, 2008
Secretary of State

Entity Name: BLUE CYPRESS LAKE RANCH, INC.

Current Principal Place of Business:

BLUE CYPRESS LAKE STATE RD 60
PO BOX 1700
VERO BEACH, FL 32961

New Principal Place of Business:

BLUE CYPRESS LAKE STATE RD 60
VERO BEACH, FL 32960

Current Mailing Address:

BLUE CYPRESS LAKE STATE RD 60
PO BOX 1700
VERO BEACH, FL 32961

New Mailing Address:

FEI Number: 59-1096536 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLMAN, H R
611 TOMAHAWK TRAIL
VERO BCH, FL 32963 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOLMAN, H.R.,
Address: 611 TOMAHAWK TRAIL
City-St-Zip: VERO BEACH, FL

Title: VD () Delete
Name: HOLMAN, THOMAS,
Address: ROSEWOOD BLVD.
City-St-Zip: VERO BEACH, FL

Title: S () Delete
Name: HOLMAN, MYRTLE,
Address: 611 TOMAHAWK TRAIL
City-St-Zip: VERO BEACH, FL

Title: D () Delete
Name: HOLMAN, PETER G.,
Address: 421 10TH AVE
City-St-Zip: VERO BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: H R HOLMAN

P

01/25/2008

Electronic Signature of Signing Officer or Director

_____ Date