

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 338495

FILED
Jan 14, 2009
Secretary of State

Entity Name: OSCEOLA CYPRESS COMPANY

Current Principal Place of Business:

SUITE 300
9724 N. ARMENIA AVE.
TAMPA, FL 33612 US

New Principal Place of Business:

Current Mailing Address:

SUITE 300
9724 N. ARMENIA AVE.
TAMPA, FL 33612 US

New Mailing Address:

FEI Number: 59-1226735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANCINIK, WILLIAM L
899 E NEW YORK AVE
DELAND, FL 32724 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: P () Delete
Name: MANCINK, JEFFERSON J
Address: 9724 N ARMENIA AVE SUITE 300
City-St-Zip: TAMPA, FL 33612 US

Title: T () Delete
Name: MANCINIK, WILLIAM
Address: 899 E NEW YORK AVE
City-St-Zip: DELAND, FL 32724

Title: S () Delete
Name: BRENNAN, MARY V
Address: 899 E NEW YORK AVE
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MANCINK, JEFFERSON J PRES
Address: 9724 N ARMENIA AVE SUITE 300
City-St-Zip: TAMPA, FL 33612 US

Title: T (X) Change () Addition
Name: MANCINIK, WILLIAM TREAS
Address: 899 E NEW YORK AVE
City-St-Zip: DELAND, FL 32724

Title: S (X) Change () Addition
Name: BRENNAN, MARY V SECR
Address: 899 E NEW YORK AVE
City-St-Zip: DELAND, FL 32724

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: JEFFERSON J MANCINIK

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date