

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 04 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 556515

(5)

1. Corporation Name  
CYPRESS EXCHANGE, INC.

Principal Place of Business

1389 CYPRESS AVE.  
MELBOURNE FL 32935

Mailing Address

1389 CYPRESS AVE.  
MELBOURNE FL 32935-5932

3. Date Incorporated or Qualified  
12/30/1977

3a. Date of Last Report  
05/01/1996

4. FEI Number  
59-1800882

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

2. Principal Place of Business

21 1395 Cypress Ave.  
Suite, Apt. #, etc.

2a. Mailing Address

26 1395 Cypress Ave.  
Suite, Apt. #, etc.

City & State

23 Melbourne, FL.

City & State

28 Melbourne, FL.

24 32935-5994 25 Country USA

29 32935-5994 30 Country USA

9. Name and Address of Current Registered Agent

RUSSELL, KEVIN J.  
1313 RIDGEWOOD DR  
MELBOURNE FL 32935

10. Name and Address of New Registered Agent

81 Name Kenneth R. LeBoeuf  
82 Street Address (P.O. Box Number is Not Acceptable)  
1197 Flintlock Avenue, S.E.  
83  
84 City Palm Bay FL 85 Zip Code 32909-4708

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 Kenneth R. LeBoeuf President

3-31-97  
DATE

12. OFFICERS AND DIRECTORS

TITLE	P/D	<input checked="" type="checkbox"/> DELETE
NAME	RUSSELL KEVIN, CURTIS	
STREET ADDRESS	1313 RIDGEWOOD DR	
CITY - ST - ZIP	MELBOURNE FL 32935	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	RUSSELL, CANDACE	
STREET ADDRESS	1313 RIDGEWOOD	
CITY - ST - ZIP	MELBOURNE FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	FERRONE, BETTY	
STREET ADDRESS	3584 SWALLOW	
CITY - ST - ZIP	MELBOURNE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D/C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Kenneth Robert LeBoeuf	
1.3 STREET ADDRESS	1197 Flintlock Avenue, S.E.	
1.4 CITY - ST - ZIP	Palm Bay, Florida 32909-4708	
2.1 TITLE	S/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Linda Woods LeBoeuf	
2.3 STREET ADDRESS	1197 Flintlock Avenue, S.E.	
2.4 CITY - ST - ZIP	Palm Bay, Florida 32909-4708	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Kenneth R. LeBoeuf Kenneth R. LeBoeuf  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-17-97  
Date

407-254-3595  
Daytime Phone #

CR2E034 (9/96)