

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 650427

Entity Name: B-K CYPRESS, INC.

FILED  
Mar 24, 2005  
Secretary of State

**Current Principal Place of Business:**

900 HATHAWAY  
BRONSON, FL 32621

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 207  
BRONSON, FL 32621

**New Mailing Address:**

FEI Number: 59-2013661

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BARR, CRAIG  
609 GILBERT STREET  
BRONSON, FL 32621 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: PV ( ) Delete  
Name: BARR, ELIZABETH  
Address: 900 HATHAWAY  
City-St-Zip: BRONSON, FL

Title: VP ( ) Delete  
Name: BARR, ELIZABETH,  
Address: 900 HATHAWAY  
City-St-Zip: BRONSON, FL

Title: ST ( ) Delete  
Name: BARR, CRAIG  
Address: 900 HATHAWAY  
City-St-Zip: BRONSON, FL 32621

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELIZABETH BARR

P

03/24/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date