

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706775

FILED
Apr 04, 2009
Secretary of State

Entity Name: CYPRESS RIDGE APARTMENTS INC

Current Principal Place of Business:

1401 S E 7TH AVENUE
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

1401 S E 7TH AVENUE
4
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 59-1694444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SACKS, PAUL A
1404 SE 7TH AVENUE
4
POMPANO BEACH, FL 33060 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BROTHERS, NORMAN
Address: 1401 SE 7TH AVENUE #5
City-St-Zip: POMPANO BEACH, FL 33060

Title: VPD () Delete
Name: VISSER, JAKE
Address: 1401 SE 7TH AVENUE #12
City-St-Zip: POMPANO BEACH, FL 33060

Title: STD () Delete
Name: SACKS, PAUL
Address: 1401 SE 7AVE #4
City-St-Zip: POMPANO BEACH, FL 33060

Title: VPD () Delete
Name: CREZEE, MICHAEL
Address: 1401 SE 7 AVE #11
City-St-Zip: POMPANO BEACH, FL 33060

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL SACKS

STD

04/04/2009

Electronic Signature of Signing Officer or Director

Date