## 2005 NOT-FOR-PROFIT CORPORATION A MUAL REPORT (AR)

**SIGNATURE** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Mar 04, 2005 8:00 am **Secretary of State** DOCUMENT + 8213 1. Entity Name 03-04-2005 90072 013 \*\*\*\*61.25 CYPRESS LAKE EAST #3, INC. Principal Place of Business Mailing Address 701 SE 7TH AVENUE POMPANO BEACH FL 33060 701 SE 7TH AVENUE POMPANO BEACH FL 33060 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) City & State Applied For City & State 4. FEI Number 59-1172820 Not Applicable Žip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BRIAN W. RAINES GATTO, LES Street Address (P.O. Box Number is Not Acceptable) 701 SE 7TH AVE POMPANO BEACH FL 33060 701.SE.TH NE 8. The above named entity submits this statement or the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATUR (NOTE: Registered Agent signature required when reinstating) ped or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Delete TITLE Change : LES, GATTO BRIAN W, RAINES NAME 701 SE 7TH AVE., #8 701, S.E. 7th AVE #7 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33060 POMDANO BEXCH FL. 33060 CITY-ST-ZIP CITY-ST-7P D.V. TITLE Change ■ Addition ☐ Detete TITLE ANTHONY SPARACINO 15 IDENE LANG RAINES, BRIAN NAME NAME 701 SE 7TH AVE 37 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33060 CITY-ST-ZIP CITY ST-ZIP-COMMACK-NY 11725 ☐ Delete GATTO, LES NAME NAME VINNY PELLECHIA 1321-SE 714 NE 701.SE.7 AVENUE #8 STREET ANDRESS STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33060 CITY-ST-ZIP POM PAND BEACH FL 33060 Delete Change ☐ Addition SPERA, UNA CHERYL SMITH 701 S.E. 7 HE AVE #1 POMPANO BEACH, FL.33060 701 SE 7TH AVE #8 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33060 CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Addition Delete TITE F D. LES. GATO PELLECHIA, LIZ NAME NAME 701.5.E.7KAUE#8 701 SE 7TH AVE., #6 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33060 POMPANO BEACH FL.33060 CITY-ST-7IP CITY-ST-ZIP Delete Change TITLE TITLE ☐ Addition LANCE LOVE JOY DEFLICE, BARBARA NAME NAME 701.6.E. 7th NE#12 701 SE 7TH AVE., #9 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33060 POMPANO BEACH FL 33060 CITY-ST-ZIP CITY-ST-ZIP 12. I 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 report or suppliemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

Daytime Phone #