

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 DEC 17 AM 8:01

DOCUMENT # 723866

1. Entity Name  
CYPRESS LAKE NO. 3, INC.



Principal Place of Business  
701 S E 15TH ST  
#4  
POMPANO BEACH, FL 33060

Mailing Address  
701 S E 15TH ST  
#4  
POMPANO BEACH, FL 33060



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

11122008 REIN-NP

CR2E099 (1/07)

City & State

City & State

4. FEI Number  
59-2087980

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUSSELL, EDWARDS  
701 SE 15TH ST #4  
POMPANO BEACH, FL 33060

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

11-12-08

**FILE NOW!!! FEE IS \$61.25**  
**After January 1, 2009, Fee will be \$122.50**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Make check payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE STD ☐ Delete  
NAME RUSSELL, EDWARDS  
STREET ADDRESS 701 SE 15TH ST  
CITY-ST-ZIP POMPANO BEACH, FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 100139094361  
CITY-ST-ZIP 12/17/08--01024--001 \*\*\$1.25

TITLE VP ☐ Delete  
NAME HAILEY, CINDY  
STREET ADDRESS 701 SE 15TH STREET  
CITY-ST-ZIP POMPANO BEACH, FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME JAMES, EDWARD  
STREET ADDRESS 701 SE 15TH ST  
CITY-ST-ZIP POMPANO BEACH, FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PD ☐ Delete  
NAME HALLEY, JOHN  
STREET ADDRESS 701 SE 15TH ST  
CITY-ST-ZIP POMPANO BEACH, FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-12-08

Date

954-804-2296

Daytime Phone #