725590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

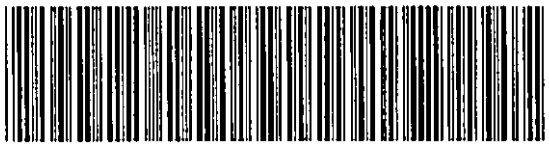
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200300274012

Filings Prior to 1995

NP
25
590

NP 25,590

NP #25,590

CYPRESS BEND PROTECTIVE CORPORATION, INC.

FILED IN OFFICE OF DEPARTMENT OF STATE, STATE OF FLORIDA.
by ch , on Feb. 19, 1973

RICHARD (DICK) STONE
SECRETARY OF STATE

corp-1

RUDEN, BARNETT, MCCLOSKY, SCHUSTER & SCHMERER
ATTORNEYS AT LAW

SIMON RUDEN (1915-1967)
ELLIOTT B. BARNETT
DONALD C. McCLOSKY
CARL SCHUSTER
HENRY M. SCHMERER
TERRENCE J. RUSSELL
LAZ L. SCHNEIDER
HARVEY G. KOPELOWITZ
BRUCE D. GOORLAND

900 NORTHEAST 2ND AVENUE
FORT LAUDERDALE, FLORIDA 33304
(305) 565-9362
DIRECT MIAMI 945-8601
PLEASE REPLY TO: P. O. BOX 7278

January 18, 1973

Division of Corporation
Department of State
Tallahassee, Florida 32304

WSH
LD

Re: Cypress Bend Protective Corporation

JAN 24 - 11900 ****3.00
JAN 24 - 11800 ****5.00
JAN 24 - 11700 ****30.00

Gentlemen:

Enclosed herewith are:

1. An original and xerox copy of Articles of Incorporation of Cypress Bend Protective Corporation.

2. Our check in the amount of $38.00 in payment of the following:

   a. filing fee in the amount of $30.00
   b. certified copy in the amount of $5.00
   c. resident agent fee in the amount of $3.00

3. A Certificate Designating Resident Agent.

FILED
FEB 13 9 11 AM '73
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

If you have any questions with regard to this matter, you are authorized to call the undersigned, collect.

Thank you very much.

NP25-590

PRIVILEGE TAX
C. TAX 30.00
FILING 5.00
C. COPY 3.00
R. A. FEE
P. COPY
SEARCH
TOTAL 38.00
BALANCE DUE
REFUND

Very truly yours,

RUDEN, BARNETT, McCLOSKY, SCHUSTER & SCHMERER

Elliott B. Barnett

EBB:bjb

Count 2/19/73 DC

-Fees Paid

STATE OF FLORIDA

Department of State

THE CAPITOL
TALLAHASSEE 32304

RICHARD (DICK) STONE
SECRETARY OF STATE

ROY L. ALLEN, DIRECTOR
DIVISION OF CORPORATIONS
904/488-3140
(TWX) 810/831-3677

January 26, 1973

Elliott B. Barnett, Esquire
Post Office 7276
Fort Lauderdale, Florida 33304

Dear Mr. Barnett:

Subject: CYPRESS BEND PROTECTIVE CORPORATION

FILED
73 FEB 1 AM 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Document: returned XX pending _____ Withdrawal _____
Charter XX Amendment _____ Merger _____ Dissolution _____

1. _____ Name is not available.

2. XX Name must include a corporate suffix. Inc. or Incorporated

3. XX Check for $38.00 has been received and deposited ~~XXEXXX~~ ~~XXXXXXXXXXXXXXXXXXXXXXXXXXXX~~ Charter tax _____ Filing fee _____ Certified copy _____ Resident agent fee _____.

4. _____ Complete mailing address for principal place of business, directors, and subscribers which must include a street address, rural route, or highway.

5. _____ The number of directors the corporation shall have must be shown with a statement designating the total number.

6. _____ All subscribers must sign and their signatures must be notarized.

7. _____ Notary public's acknowledgement is incomplete.

8. _____ President's signature must be acknowledged.

9. _____ Amendment must include a statement of approval of stockholders and directors.

10. ____ Resident agent must be designated at the time of filing certificate of incorporation. See attached for instructions.

11. ____ Other

Sincerely,

RICHARD (DICK) STONE
Secretary of State

By David S. Jones
David S. Jones, Chief
Bureau of Corporation Records

DSJ/ws

Corp. 84
6-1-72

RUDEN, BARNETT, McCLOSKY, SCHUSTER & SCHMERER
ATTORNEYS AT LAW

SIMON RUDEN (1918-1967)
ELLIOTT B. BARNETT
DONALD C. McCLOSKY
CARL SCHUSTER
HENRY M. SCHMERER
TERRENCE J. RUSSELL
LAZ L. SCHNEIDER
HARVEY G. KOPELOWITZ
BRUCE D. GOORLAND

900 NORTHEAST 26TH AVENUE
FORT LAUDERDALE, FLORIDA 33304
(305) 563-9302
DIRECT MIAMI 945-8691
PLEASE REPLY TO P.O. BOX 7276

February 15, 1973

Mr. David S. Jones, Chief
Bureau of Corporation Records
Department of State
The Capitol
Tallahassee, Florida 32304

RE: CYPRESS BEND PROTECTIVE CORPORATION, INC.

Dear Mr. Jones:

In accordance with your letter of January 26th in which you returned the Articles of Incorporation of Cypress Bend and Certificate Designating Place of Business and Naming Resident Agent which have been corrected, and which now read Cypress Bend Protective Corporation, Inc.

Very sincerely,

RUDEN, BARNETT, McCLOSKY,
SCHUSTER & SCHMERER

Elliott B. Barnett

EBB mo
Enclosures

ARTICLES OF INCORPORATION

OF

CYPRESS BEND PROTECTIVE CORPORATION, INC.
(A Corporation not-for-Profit)

In order to form a corporation under and in accordance with the provisions and the laws of the State of Florida for the formation of corporations-not-for-profit, we, the undersigned, hereby associate ourselves into a corporation for the purpose and with the powers hereinafter mentioned; and to that end we do, by these Articles of Incorporation, set forth the following:

ARTICLE I
DEFINITIONS

The following words and phrases when used in these Articles (unless the context shall prohibit) shall have the following meanings:

1. "Cypress Bend" means the 113 acres of land owned by the Developer in Broward County, Florida more particularly described in the Declaration.

2. "Declaration" means the Declaration of Protective Covenants and Restriction for Cypress Bend promulgated by the Developer to be recorded amongst the Public Records of Broward County, Florida.

3. "Developer" means Cypress Bend, a Joint Venture consisting of Labco Development Corporation, a Florida Corporation and Cypress Bend Corporation, a Florida Corporation.

4. "Dwelling Unit" means a residential unit of CYPRESS BEND defined in the Declaration.

5. "Reisdential Properties" means those protions of CYPRESS BEND upon which Dwelling Units are to be located.

6. "Recreation Land" means the portions of CYPRESS BEND real property described in Exhibit B, C, D, and E to the Declaration and where the context required shall mean all improvements and personal property contained thereon.

7. "Future Recreation Land" means any other portions of CYPRESS BEND made subject to the Declaration by the Developer.

8. "Association" means a Florida corporation not-for-profit responsible for operating one or more of the condominiums of CYPRESS BEND.

9. "Common Expenses" means expenses for which the Apartment Owners are liable to the Association as defined in the Act and in the Condominium Documents.

10. "Protective Corporation Documents" means these Articles of Incorporation, the By-Laws and Rules and Regulations of the Protective Corporation.

11. "Governors" means the Board of Governors of the Protective Corporation.

12. "Operating Expenses" means the expenses of operating and maintaining the Recreation Land and Future Recreation Land, such as taxes, insurance, and maintenance expenses referred to in the Declaration; all operating and administrative expenses of the Protective Corporation; and, any expenses determined to be Operating Expenses by the Governors.

ARTICLE II
NAME

The name of this corporation shall be CYPRESS BEND PROTECTIVE CORPORATION,INC.For convenience, the Corporation shall be herein referred to as the "Corporation", whose present address is 1000 Pompano Parkway, Pompano Beach, Florida 33309.

ARTICLE III
PURPOSES

The purpose for which this corporation is organized is to take title to and operate the Recreation Land and Future Recreation Land and carry out the covenants and enforce the provisions of and under the Declaration.

ARTICLE IV
POWERS

The powers of this Corporation shall include and be governed by the following provisions:

A. This Corporation shall have all of the common law and statutory powers of a corporation not-for-profit.

B. This Corporation shall have all of the powers reasonably necessary to implement its purposes including but not limited to, the following:

1. To do all of the acts required to be performed by it under the Declaration.

2. To make, establish and enforce rules and regulations governing the use of the Recreation Land and Future Recreation Land.

3. To make, levy and collect assessments for the purpose of obtaining funds from its members to pay for the operational expenses of this Corporation; Operating Expenses; and costs of collection; and, to use and expend the proceeds of assessments in the exercise of its powers and duties hereunder;

4. To maintain, repair, replace and operate the Recreation Land and Future Recreation Land in accordance with the Declaration.

5. To enforce by legal means the obligations of the members of this Corporation and the provisions of the Declaration.

6. To contract for professional management and to delegate to such Management Company the powers and duties of this Corporation;

ARICLE V
MEMBERS

The qualification of members, the manner of their admission to membership, the termination of such membership and voting by members shall be as follows:

1. There shall be "Association Members" and "Owner Members" as set forth in the Declaration which shall comprise the membership of this Corporation.

2. Membership shall be established as follows:

(a) Association Members: By the filing with the office of the Secretary of State of Florida of the Articles of Incorporation of the Association and effective with the recordation of the first Declaration of Condominium for the Phase operated by the Association named in the Articles, such Association shall become an Association Member of this Corporation. Each Association shall notify this Corporation of the recordation of the first such Declaration and shall transmit to this Corporation true copies of all Declarations of Condominium and current lists of Apartment Owners. Upon termination of a condominium, as provided in the Declaration of Condominium, the Apartment Owners in the terminated condominium shall be collectively an Owner Member.

(b) Owner Members: Such Owner Membership shall be established effective with issuance of Certificate of Occupancy as to any portion of the Residential Properties. The Owner Member shall be obligated to keep this Corporation notified of the number of Dwelling Units owned by him.

3. Each and every such member shall be entitled to the benefits of membership, and shall be bound to abide by the provisions of the Protective Corporation Documents and the Declaration.

4. Until the effectiveness of the first Association Member or Owner Member, the membership of this Corporation shall be comprised of the subscribers to these Articles, and in the event of the resignation or termination of membership by voluntary agreement by any such subscriber, then the remaining subscribers may nominate and designate a successor subscriber. Each of these subscribers and their successors shall be entitled to case one vote on all matters which the membership shall be entitled to vote.

ARTICLE VI
TERM

The term for which this Corporation is to exist shall be perpetual.

ARTICLE VII
SUBSCRIBERS

The names and street addresses of the subscribers to these Articles of Incorporation are as follows:

NAME	ADDRESS
Elliott B. Barnett	900 N. E. 26th Avenue Fort Lauderdale, Florida
Barbara Bass	900 N. E. 26th Avenue Fort Lauderdale, Florida
Harvey Kopelowitz	900 N. E. 26th Avenue Fort Lauderdale, Florida
Susan Saxton	900 N. E. 26th Avenue Fort Lauderdale, Florida

ARTICLE VIII
OFFICERS

The affairs of the Association shall be managed by the President of the Association, assisted by the several Vice Presidents, Secretary and Treasurer, and, if any, by the Assistant Secretary and Assistant Treasurer, subject to the directions of the Board of Governors.

The Board of Governors shall elect the President, Secretary, and Treasurer, and as many Vice Presidents, Assistant Secretaries and Assistant Treasurers as the Board of Governors shall, from time to time determine. The President shall be elected from amongst the membership of the Board of Governors, but no other officer need be a Governor. The same person may hold two offices, the duties of which are not incompatible, provided, however, the office of President and a Vice President shall not be held by the same person, nor shall the office of President and Secretary or Assistant Secretary be held by the same person.

ARTICLE IX
FIRST OFFICERS

The names of the officers who are to serve until the first election of officers by the Board of Governors are as follows:

President	Lester A. Byron
Vice President	Hunter Moss
Secretary	Steven W. Epple
Treasurer	Alan W. Kimbro

ARTICLE X
BOARD OF GOVERNORS

1. The number of members of the First Board of Governors (the "First Board") shall be Four (4). Thereafter, the number of members of the Board shall be increased as provided in Section 3 of this Article.

2. The names and street addresses of the persons who are to serve as the First Board are as follows:

NAME	ADDRESS
Lester A. Bryon	111 N. E. 44th Street Fort Lauderdale, Florida
Steven W. Epple	111 N. E. 44th Street Fort Lauderdale, Florida
Hunter Moss	2121 Ponce DeLeon Blvd. Coral Gables, Florida
Alan W. Kimbro	2121 Ponce DeLeon Blvd. Coral Gables, Florida

3. Membership of all Boards elected subsequent to the First Board shall be composed of two (2) Board members designated by each Association Member and One (1) Board member for every 150 Dwelling Units owned by an Owner Member or group of Owner Members collectively.

4. The First Board shall be the Board of Governors of this Corporation until the "Turn Over Date" defined in the Declaration. Thereupon and annually on the first Monday in November of each year, the membership shall designate Board Members in accordance with the provisions of paragraph 3 of this Article X.

5. The Developer shall have the right to appoint, designate and elect all of the members of the First Board. The Developer shall relinquish its right to appoint Governors and cause the First Board to resign at the time hereinabove described in the first sentence of Section 4.

ARTICLE XI
INDEMNIFICATION

Every Governor and every officer of the Corporation shall be indemnified by the Corporation against all expenses and liabilities, including counsel fees reasonably incurred by or imposed upon him in connection with any proceeding to which he may be a party, or in which he may become involved, by reason of his being or having been a Governor or officer of the Corporation, or any settlement thereof, whether or not he is a Governor or officer at the time such expenses are incurred, except in such cases wherein the Governor or Officer is adjudged guilty of wilful misfeasance or malfeasance in the performance of his duties; provided that in the event of a settlement, the indemnification herein shall apply only when the Board of Governors approves such settlement and reimbursement as being for the best interest of the Corporation. The foregoing right of indemnification shall be in addition to and not exclusive of all right to which such Director or officer may be entitled by common law or statutory law.

ARTICLE XII
BY-LAWS

By-Laws of this Corporation may be adopted by any of the Board of Governors, and may be altered, amended or rescinded in the manner provided for by the By-Laws.

ARTICLE XIII
AMENDMENTS

These Articles of Incorporation may be amended by the Governors alone in the following manner:

A. Notice of the subject matter of the proposed amendment shall be included in the notice of the meeting of the Board at which such proposed amendment is considered.

B. A resolution approving a proposed amendment shall be adopted by a majority of the Board of Governors, and certified to by the President and attested by the Secretary or Assistant Secretary of this Corporation.

C. No amendment may be made to the Articles of Incorporation which shall in any manner reduce, amend, affect or modify the provisions and obligations set forth in the Declaration.

D. A copy of each amendment shall be certified by the Secretary of State.

E. Notwithstanding the foregoing provisions of this Article XIII no amendment to these Articles of Incorporation which shall abridge, amend or alter the rights of the Developer to designate and select members of the First Boars as provided in Article X hereof, may be adopted or become effective without the prior written consent of the Developer.

IN WITNESS WHEREOF, the subscribers have hereunto affixed their signatures, this 15th day of January, 1973.

STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared ELLIOTT B. BARNETT, BARBARA BASS, HARVEY KOPELOWITZ and SUSAN SAXTON to me known to be the persons described as Subscribers in and who executed the foregoing Articles of Incorporation and they acknowledged before me that they executed the same for the purposes therein expressed.

IN WITNESS WHEREOF, the subscribers have hereunto affixed their signatures, this 15th day of January, 1973.

Marion C. Bruin
Notary Public

My Commission Expires:

Notary Public, State of Florida at Large
My Commission Expires [illegible]

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

Pursuant to Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

CYPRESS BEND PROTECTIVE CORPORATION, INC., a corporation being organized under the laws of the State of Florida, with its principal office located at 1000 Pompano Parkway, Pompano Beach, Florida 33309 has named Elliott B. Barnett with an office at 900 N. E. 26th Avenue, Fort Lauderdale, Florida as its agent to accept service of process within this State of Florida.

ACKNOWLEDGMENT:

Having been named to accept service of process for CYPRESS BEND PROTECTIVE CORPORATION, INC. at the place designated in this certificate, I hereby agree to act in such capacity, and agree to comply with the provisions of said Act with respect to keeping such office open.

By: _____
Elliott B. Barnett
Resident Agent

725590 92

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST--THAT CYPRESS BEND PROTECTIVE CORPORATION, INC.
(NAME OF CORPORATION)

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA,

WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF POMPANO BEACH,
(CITY)

STATE OF FLORIDA, HAS NAMED WILLIAM L. BARALL,
(STATE) (NAME OF RESIDENT AGENT)

LOCATED AT 2320 CYPRESS BEND DRIVE SOUTH,
(STREET ADDRESS AND NUMBER OF BUILDING,
POST OFFICE BOX ADDRESSES ARE NOT ACCEPTABLE)

CITY OF POMPANO BEACH, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT
(CITY)

SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE William L. Barall
(CORPORATE OFFICER)

TITLE PRESIDENT

DATE Oct 11 1978

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE William L. Barall
(RESIDENT AGENT)

DATE Oct 11 1978

Filing Fee: $[illegible]

CORP. 25
1/1/76

ANNUAL REPORT
FOR CORPORATIONS AND OTHER ENTITIES

VALIDATION AREA - DO NOT WRITE IN THIS SPACE

SECRETARY OF STATE
RICHARD (DICK) STONE
P.O. BOX 6327
TALLAHASSEE, FLA. 32301

DUE JAN 1. | DELINQUENT JULY 1. | CORP ARTS | PAGE 1

(1) 725590 CHARTER NUMBER

(2) Feb. 19, 1973 DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA.

(3) EXACT NAME: Cypress Bend Protective Corporation, Inc.

(4) FED. EMP. I.D. NO. to be supplied later (5) SICC 8699 (SEE PAGE 4)

(6) RESIDENT AGENT:
Elliott B. Barnett
900 N. E. 26th Ave.
Fort Lauderdale, Fla. 33304

(7) OFFICERS/DIRECTORS NAMES — CITY / STATE

Eugene I. Ross	1000 Pompano Pkway
Gary Kotin	Pompano Beach
Frederick Peterson	Fla. 33309
Donald W. White	

(8) FISCAL CLOSE OF ACCOUNTING PERIOD Dec,

(9) MAILING ADDRESS:
1000 Pompano Pkway,
Pompano Beach, Fla. 33304

(10) PRIMARY STOCK (see 10b)

AUTH. STK. PAR VALUE

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES; I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THIS REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

AUTHORIZED SIGNATURE

(11) TITLE (SEE PAGE 4) TEL. NO.

CORRECTIONS AND ADDITIONAL INFORMATION-PLEASE TYPE

(4a) FED. EMPLOYER ID. NO.

(5a) SICC (SEE PAGE 4)

(6a)

OFFICERS/DIRECTORS | STREET ADDRESS | CITY, STATE | TITLE

(7a)

- IF ADDITIONAL OFFICERS/DIRECTORS ATTACH ADDENDUM SHEET -

(8a) FISCAL CLOSE OF ACCOUNTING PERIOD (MONTH)

(9a)

(9b) STREET ADDRESS

(10a) CAPITAL STOCK NUMBER & PAR VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION:
CLASS OF STOCK | PAR OR NO PAR OR STATED VALUE | SHARES AUTHORIZED | NUMBER ISSUED
(1) $
(2) $

(10b) IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED
Corporation not for-profit; no primary stock; interest based on certificate

(12) RESIDENT AGENT SIGNATURE

JAN 2 11 21 AM 1975
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ INSTRUCTIONS ON PAGE 2
FILING FEES $5.00 PROFIT ENTITY $2.00 NON PROFIT

CORPORATION ANNUAL REPORT

ANNUAL FILING FEES
$5.00—PROFIT CORP
$2.00—NON-PROFIT CORP

DUE—JAN. 1 DELINQUENT—JULY 1

VALIDATION AREA - DO NOT WRITE IN THIS SPACE

- 62400 ★★★★★3.00
- 62300 ★★★★2.50

REMIT THIS FORM & FILING FEE TO

SECRETARY OF STATE
THE CAPITOL
TALLAHASSEE, FLORIDA
32304

(1) 725590 (2) CHARTER NUMBER

(2) 02/19/1973 DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA.

(3) SICC 8699 SEE ENVELOPE BACK

(3a) CHANGE TO

1974 YEAR OF LAST REPORT FILED IN THIS OFFICE

1975 YEAR(S) THIS REPORT COVERS

(4) FED EMPLOYER ID. NO

(4a) CHANGE TO

(5) FISCAL CLOSE OF ACCOUNTING PERIOD (MO)

(5a) CHANGE TO

(6) EXACT NAME: CYPRESS BEND PROTECTIVE CORPORATION, INC.

DO NOT WRITE IN THIS SPACE — FOR DIVISION USE ONLY

FILED
APR 26 10 34 AM '76
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OT 4-26-76

PLEASE READ INSTRUCTIONS ON BACK

(7) IF RESIDENT AGENT AND/OR ADDRESS IS DIFFERENT, WRITE THIS OFFICE AT THE ABOVE ADDRESS FOR PROPER FORMS.

RESIDENT AGENT AND STREET ADDRESS: BARNETT, ELLIOTT J.
900 S.E. 20TH AVE.
FT. LAUDERDALE, FL.

NOTICE: IN THE FUTURE, ALL MAIL WILL BE ADDRESSED TO THE PHYSICAL STREET ADDRESS OF CORPORATION. TO COMPLY WITH THIS REQUIREMENT, PLEASE CHANGE THE MAILING ADDRESS TO REFLECT THE PHYSICAL STREET ADDRESS OF THE PRINCIPAL PLACE OF BUSINESS IF NOT ALREADY STATED

(8) ADDRESS: 725590
CYPRESS BEND PROTECTIVE CORP INC
1000 PUMPAS PARK WAY
POMPANO BEACH, FL.

(8a) CHANGE TO.
NO P O BOX

(9) OFFICERS/DIRECTORS NAMES

OFFICERS/DIRECTORS NAMES	STREET ADDRESS	CITY / STATE	TITLE(S)	
RUSS, EUGENE T.	2301 Cypress Bend Drive South	Pompano Beach, FL.	Pres	Dir.
KUTEN, GARY	2301 Cypress Bend Drive South	Pompano Beach, FL.	V.P.	Dir.
PETERSEN, FREDERICK	2301 Cypress Bend Drive South	Pompano Beach, FL.	Sec	Dir.
WHITE, DONALD	2301 Cypress Bend Drive South	Pompano Beach, FL.	Treas	Treas

STRIKE THROUGH INCORRECT ENTRY AND TYPE CORRECT INFORMATION IN SPACE PROVIDED IMMEDIATELY BELOW LINE

CAPITAL STOCK

(10) RECEIVED

(10) CAPITAL STOCK (OR NUMBER'S BOOK VALUE OF ALL CERTIFICATES OF INTEREST OR PARTICIPATION)

CLASS OR TYPE	PAR NO PAR OR STATED VALUE	SHARES AUTHORIZED	NUMBER BOOK VALUE
(1)			$
(2)			$

IF YOU DO NOT HAVE CAPITAL STOCK, DESCRIBE THE GENERAL RULES APPLICABLE TO ALL MEMBERS BY WHICH THE PROPERTY RIGHTS AND INTERESTS OF EACH ARE DETERMINED

I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES; I FURTHER DECLARE THAT I AM THE AUTHORIZED PERSON TO SIGN THE REPORT FOR THIS ENTITY AND THAT IT IS TRUE AND CORRECT.

AUTHORIZED SIGNATURE

TITLE Secretary TEL. NO. 792-5720

DATE 4/26/76

CORP-AR75

725590

AFFIDAVIT

STATE OF FLORIDA)
) ss:
COUNTY OF BROWARD)

BEFORE ME, the undersigned authority, duly authorized in said County and State, personally appeared ELLIOTT B. BARNETT, who is known to me, and who, being by me first duly sworn, on oath deposed and said:

1. That he was designated as the Resident Agent for CYPRESS BEND PROTECTIVE CORPORATION, INC., a Florida corporation.

2. That he has resigned as such Resident Agent.

3. That a copy of this Affidavit, together with his Resignation, has been mailed to the principal business office of CYPRESS BEND PROTECTIVE CORPORATION, INC., to wit:

ELLIOTT B. BARNETT

SWORN to and subscribed before me this 9th day of November, 1976.

Notary Public

My Commission Expires:

Notary Public, State of Florida at Large
My Commission Expires Dec. 5, 1976
Bonded by American Fire & Casualty Co.

8-2442

RESIGNATION

TO: CYPRESS BEND PROTECTIVE CORPORATION, INC.

The undersigned does hereby tender his resignation as Resident Agent of CYPRESS BEND PROTECTIVE CORPORATION, INC., such resignation to take effect immediately.

DATED this 9th day of November, 1976.

Witness:

ELLIOTT B. BARNETT

RUDEN, BARNETT, McCLOSKY, SCHUSTER & SCHMERER
ATTORNEYS AT LAW

SIMON RUDEN (1915-1967)
ELLIOTT B. BARNETT
DONALD C. McCLOSKY
CARL SCHUSTER
HENRY M. SCHMERER
LAZ L. SCHNEIDER
TERRENCE J. RUSSELL
BRUCE D. GOORLAND
BRIAN J. SHERR
ALLEN H. SHEPTOW
BARRY A. HANDELKORN
GLENN N. SMITH
MICHAEL P. KRUL
SCOTT J. FUERST
JOHN L. FARQUHAR
STEVEN J. GUTTER
STEPHEN D. McCANN

800 NORTHEAST 26TH AVENUE
FORT LAUDERDALE, FLORIDA 33304
(305) 565-9367

DIRECT MIAMI 944-3283
TELECOPIER 563-7291

PLEASE REPLY TO: P.O. BOX 7270

November 10, 1976

Department of State
Division of Corporations
The Capitol
Tallahassee, Florida 32304

Re: Cypress Bend Protective Corporation, Inc.

Gentlemen:

Enclosed herewith please find the following:

1. The original fully executed Annual Report form covering the year 1976;

2. Fully executed Designation of Resident Agent form;

3. Fully executed Resignation of Resident Agent form;

4. This law firm's check in the amount of $11.00 covering:

(i) $5.00 for filing of corporate annual report form;
(ii) $3.00 for filing of designation of resident agent form;
(iii) $3.00 for filing of resignation of resident agent form.

PRIVILEGE TAX	5
C. TAX	
FILING	
C. COPY	
R. A. FEE	6
P. COPY	
SEARCH	
TOTAL	11
BALANCE DUE	

Very truly yours,

RUDEN, BARNETT, McCLOSKY,
SCHUSTER & SCHMERER

Stephen D. McCann

SDN:ms
Enclosures

CORPORATION ANNUAL REPORT

(1) CHARTER NUMBER: 725590

(2) DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA.: 2/19/1973

(3) SICC SEE ENVELOPE BACK: 8699

(3a) CHANGE TO:

1975 YEAR OF LAST REPORT FILED IN THIS OFFICE

1976 YEAR/S THIS REPORT COVERS

(4) FED. EMPLOYER ID NO: 59-1577746

(4a) CHANGE TO:

PLEASE READ INSTRUCTIONS ON BACK

(5) EXACT NAME: CYPRESS BEND PROTECTIVE CORPORATION, INC.

(6) ADDRESS: 2320 Cypress Bend Drive South
Pompano Beach, Florida 33060

(6a) STREET ADDRESS CHANGE

(7) REGISTERED AGENT AND STREET ADDRESS: William L. Barall
2320 Cypress Bend Drive South
Pompano Beach, Florida 33060

(7a) REGISTERED AGENT NAME CHANGE AND/OR ADDRESS CHANGE INCLUDE REGISTERED OFFICE ADDRESS

(8)

NAMES OF ALL OFFICERS AND DIRECTORS	STREET ADDRESS	CITY / STATE	TITLES MUST BE SHOWN	
William L. Barall	2320 Cypress Bend Dr. S.	Pompano Beach, FL	Pres	Dir
Paul Brackley	2320 Cypress Bend Dr. S.	Pompano Beach, FL	VP/Trea/D	
Peggy L. Herlong	2320 Cypress Bend Dr. S.	Pompano Beach, FL	Sec.	Dir

DO NOT WRITE IN THIS SPACE

FILED
NOV 16 1976
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/16/76

I CERTIFY THAT I AM AN OFFICER OF THIS CORPORATION EMPOWERED TO EXECUTE THIS REPORT AS REQUIRED BY CHAPTER 607, FLORIDA STATUTES. I FURTHER CERTIFY THAT I UNDERSTAND MY SIGNATURE ON THIS REPORT SHALL HAVE THE SAME LEGAL EFFECT AS IF MADE UNDER OATH.

SIGNATURE: William L Barall

TITLE: President TEL. NO. 943-4465

DATE: Oct 11, 1976

CORP AR75

G74432

corp-32

NP # 25,590

CYPRESS BEND PROTECTIVE CORPORATION, INC.

(xx) New Corporation ( ) Reincorporation ( ) Amendment (§617.02)

Filed: Feb. 19, 1973 By:

B-743

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Bruce A. Smathers
Secretary of State

Form COR 620

CORPORATION ANNUAL REPORT 1977

FILED
APR 25 9 52 AM 1977
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THIS REPORT MUST BE ACCOMPANIED BY A $5 FEE

RECEIVED JAN - 6

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:

725590 CYPRESS BEND
PROTECTIVE CORPORATION, INC,
2320 CYPRESS BEND DRIVE SOUTH
POMPANO BEACH, FL.

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address: 2303 Cypress Bend Drive South
P.O. Box No.: --
City: Pompano Beach, Fl. 33060
State:
Zip Code:

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
02/19/1973	59-1577746	1976

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
BARALL, WILLIAM L,	PRES	DIR	2320 CYPRESS BEND DR, S,	POMPANO BEACH, FL,
BRACKLEY, PAUL	V.P.	V.P.	2320 CYPRESS BEND DR, S,	POMPANO BEACH, FL,
HERLONG, PEGGY	Secy.	DIR	2320 CYPRESS BEND DR, S,	POMPANO BEACH, FL,

7. Registered Agent Information

Name: ~~BARALL, WILLIAM L,~~ ~~2320 CYPRESS BEND DRIVE SOUTH~~
City, State and Zip Code: ~~POMPANO BEACH, FL 33060~~

If you wish to change Registered Agent on this form, enter all new information here

Name: Paul Brackley
Street Address: 2303 Cypress Bend Drive South
City, State and Zip Code: Pompano Beach, Florida 33060

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted. Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

2/28/77

Typed Name of Signing Officer	Title	Telephone Number
William L. Barall	President	974-8770
Signature William L Barall		**Date** February 28, 1977

THIS REPORT MUST BE ACCOMPANIED BY THE $5 FEE

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT
1978

Bruce A. Smathers
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE (Form COR 620) 12-1-77

FILED
JUN 30 9 00 AM 1978
FLORIDA DEP. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

▶ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◀

1. Name and Address of Corporation Principal Office:

725990 CYPRESS BEND
PROTECTIVE CORPORATION, INC,
2303 CYPRESS BEND DRIVE SOUTH
POMPANO BEACH, FL,

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
02/19/1973	59-1577746	1977

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~BARALL, WILLIAM L.~~	~~DIR~~		~~2303 CYPRESS BEND DR, S.~~	~~POMPANO BEACH, FL.~~
~~BRACKLEY, PAUL~~	~~V.P.~~		~~2303 CYPRESS BEND DR, S.~~	~~POMPANO BEACH, FL.~~
~~HERLONG, REGGY~~	~~DIR~~		~~2303 CYPRESS BEND DR, S.~~	~~POMPANO BEACH, FL.~~
BARALL, WILLIAM L.	PRES.	X	3851 INVERRARY BLVD.	LAUDERHILL, FLA
CARLMAN, LEONARD	V.P.	X	3851 INVERRARY BLVD.	LAUDERHILL, FLA.
SHARP, HARRY	SEC.	X	3851 INVERRARY BLVD.	LAUDERHILL, FLA.
MANNING, LOU		X	3851 INVERRARY BLVD.	LAUDERHILL, FLA.

7. Registered Agent Information

Name	Street Address (Do NOT Use P.O. Box Number)
~~BRACKLEY, PAUL~~	~~2303 CYPRESS BEND DRIVE SOUTH~~
City, State and Zip Code	
~~POMPANO BEACH, FL 33060~~	

If you wish to change Registered Agent on this form, enter all new information here ▶

Name	Street Address (Do NOT Use P.O. Box Number)
BARALL, WILLIAM L.	3851 INVERRARY BLVD
City, State and Zip Code	
LAUDERHILL, FLA. 33313	

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

DLC 06/30/78

Typed Name of Signing Officer	Title	Telephone Number
WILLIAM L. BARALL	PRESIDENT & DIRECTOR	305 - 731-9100
Signature: William L. Barall		Date: January 27, 1978

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FEB 17-79 2 :022*****10.00

1979

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

1. Name and Address of Corporation Principal Office:

725590
CYPRESS BEND PROTECTIVE CORP INC
2303 CYPRESS BEND DRIVE SOUTH
POMPANO BEACH, FL.

If above address is incorrect in any way, enter the correct address in Item 2, Include Zip Code.

2. Enter Change o. Address of Corporation Principal Office, P.O. Box Number Alone Is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 2/19/1973

4. Federal Employer Identification Number (FEIN): 59-1577746

5. Date of Last Report: 1978

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
BARALL, WILLIAM L.	P/D	3851 INVERRARY BLVD.	LAUDERHILL, FL
BRACKLEY, PAUL	V/D	3851 INVERRARY BLVD.	LAUDERHILL, FL
HERLONG, PEGGY	S/D	3851 INVERRARY BLVD.	LAUDERHILL, FL
MANNING, LOU	D	3851 INVERRARY BLVD.	LAUDERHILL, FL
Carlman, Leonard M	V/D	3851 Inverrary Blvd.	Lauderhill, Fla.
Borg, Harriett	S/D	111 E. Wacker Drive	Chicago, Ill.
Anderson, William	D	111 E. Wacker Drive	Chicago, Ill.

APPROVED AND FILED
FEB 23 1979
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

7. Registered Agent Information

Name: BARALL, WILLIAM L.

Street Address (Do NOT Use P.O. Box Number): 3851 INVERRARY BLVD.

City, State and Zip Code: LAUDERHILL, FL 33313

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

DO NOT WRITE IN THIS SPACE

8. See signature restrictions under Instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Rec 3.8.79

Typed Name of Signing Officer: William L. Barall | Title: P/D | Telephone Number: 305- 731-9100

Signature: William L Barall | Date: 1/31/79

(Form COR 8701 Rev. 10/75/78) NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

B-1166

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1980

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

72559
CYPRESS BEND PROTECTIVE CORP INC
3331 CYPRESS BEND DRIVE SOUTH
POMPANO BEACH, FL.

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address: 1151 NW 24th Street
P.O. Box No.: 5470 6/20/80
City: Pompano Beach
State: Florida
Zip Code: 33064

3. Date Incorporated or Qualified To Do Business in Florida: 2/19/1973
4. Federal Employer Identification Number (FEIN): 59-1577746
5. Date of Last Report: 1979

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
BARNETT, HERBERT	P/D	3851 INVERRARY BLVD.	LAUDERHILL, FL
CARLMAN, LEONARD M.	V/D	3851 INVERRARY BLVD	LAUDERHILL, FL
BOSS, HARRIET	S/D	111 E. WACKER DR	CHICAGO, IL
ANDERSON, WILLIAM	D	111 E. WACKER DR	CHICAGO, IL
Levy, R. D.	P/D	1151 NW 24th Street	Pompano Beach, Fl
Schwab, P. U.	V/D	1151 NW 24th Street	Pompano Beach, Fl
Nunez, A.	S/T/D	1151 NW 24th Street	Pompano Beach, Fl
Pfund, P. C.	D	1151 NW 24th Street	Pompano Beach, Fl

7. Registered Agent Information

Name: BARNETT, HERBERT Nunez, A.
Street Address (Do NOT Use P.O. Box Number): 3851 INVERRARY BLVD. 1151 NW 24th Street
City, State and Zip Code: LAUDERHILL, FL 33313 Pompano Beach, Fl 33064

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

8. **See signature restrictions under Instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
A. Nunez	Treasurer	(305) 972-7660

Signature: A. Nunez
Date: 6/6/80

DO NOT WRITE IN THIS SPACE

(Form COR 620) Rev. 11/16/79

13-20S

DS 6-25-80

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

5473 (7/80/80 725590
005 27 3.00 05

CERTIFICATE CHANGING REGISTERED AGENT OR REGISTERED OFFICE FOR SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA.

In compliance with Chapter 607.037, Florida Statutes, the following is submitted:

First--That CYPRESS BEND PROTECTIVE CORPORATION, INC.

with its principal place of business at 1151 N.W. 24th Street,

Pompano Beach (City), State of Florida (State),

has named A. NUNEZ (Registered Agent),

located at 1151 N.W. 24th Street (Street Address and Number of building, Post Office Box Addresses are not acceptable)

City of Pompano Beach, State of Florida.

The street address of the registered office and the street address of the business office of the registered agent, as changed, are identical.

The Board of Directors authorized the above change.

SIGNATURE Richard D Levy
(President ~~Vice-President~~) Richard D. Levy

DATE 6/6/80

SIGNATURE
(Registered Agent) A. Nunez

DATE 6/6/80

#725590

FILING FEE: $3.00

B-2051

CER 114
Rev. 1-79

FLORIDA — STATE OF THE ARTS

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

FILED

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

JUN 5 2 01 PM '81

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1981

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

725590
CYPRESS BEND PROTECTIVE CORP INC
1151 N.W. 24TH STREET
POMPANO BEACH, FL. 33064

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business In Florida: 2/19/1973

4. Federal Employer Identification Number (FEIN): 59-1577746

5. Date of Last Report: 1980

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LEVY, P.D.	P/D	1151 N.W. 24TH STREET	POMPANO BCH., FL
SCHWAB, P.W.	V/D	1151 N.W. 24TH STREET	POMPANO BCH, FL
NUNEZ, A.	S/T/D	1151 N.W. 24TH STREET	POMPANO BCH., FL
PFUND, P.C.	D	1151 N.W. 24TH STREET	POMPANO BCH., FL
LEVY, N.D.	V	1151 N.W. 24TH STREET	POMPANO BEACH, FL.
SCHWAB, P.W.	P/D	1151 N.W. 24TH STREET	POMPANO BEACH, FL.
HAIDOFF, S.	D	1151 N.W. 24TH STREET	POMPANO BEACH, FL.

7. Registered Agent Information

Name
NUNEZ, A.
Street Address (Do NOT Use P.O. Box Number)
1151 N.W. 24TH STREET
City, State and Zip Code
POMPANO BEACH, FL 33064

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3

0065

8. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607.F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
A. Nunez	Secretary/Treasurer	972-7660
Signature		Date: May 18, 1981

DO NOT WRITE IN THIS SPACE

725590 06-01-81 2 3 302 10.00

(Form COR E20 Rev. 10/78/80)

B-21644

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT **1982**

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE
APPROVED
AND
FILED
MAY 27 12 43 PM 1982
SECRETARY OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

► Read Notice and Instructions on Other Side Before Making Entries ◄
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office.

725590
CYPRESS BEND PROTECTIVE CORP INC
1151 N.W. 24TH STREET
POMPANO BEACH, FL. 33064

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 02/19/1973

4. Federal Employer Identification Number (FEIN): 59-1527246

5. Date of Last Report: 06/05/1981

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LEVY,R.D.	V	1151 N.W. 24TH STREET	POMPANO BCH.,FL
SCHWAB,P.W.	P/D	1151 N.W. 24TH STREET	POMPANO BCH,FL
~~NAIDOFF S.~~	~~D~~	~~1151 N.W. 24TH STREET~~	~~POMPANO BCH FL~~
A. Nunez	S/T/D	1151 N.W. 24 Street	Pompano Beach, Fl.
P.C. Pfund	D	1151 N.W. 24 Street	Pompano Beach, FL.

Registered Agent Information

7. Name and Address of Current Registered Agent

NUNEZ,A.

1151 N.W. 24TH STREET

POMPANO BEACH,FL 33064

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on: _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Signature	Date
	3/22/82
Typed Name of Signing Officer	**Title**	**Telephone Number**
A. Nunez	Secretary/ Treasurer	(305) 972-7660

COR 620 (11-81)

725590

GW 1/6

RUDEN, BARNETT, McCLOSKY, SCHUSTER & RUSSELL

ATTORNEYS AT LAW

ONE CORPORATE PLAZA • PENTHOUSE D
110 EAST BROWARD BOULEVARD
POST OFFICE BOX 1900
FORT LAUDERDALE, FLORIDA 33302
TELEPHONE (305) 764 - 6660
BOCA RATON 302 - 9771
MIAMI 944 - 3263
TELECOPIER 764 - 4096

ONE BISCAYNE TOWER • SUITE 2020
2 SOUTH BISCAYNE BOULEVARD
MIAMI, FLORIDA 33131
(305) 371 - 6262

PLEASE REPLY TO:

Fort Lauderdale

December 3, 1982

Corporate Records Bureau
Division of Corporations
Department of State
P.O. Box 6327
Tallahassee, FL 32301

Amend

Re: CYPRESS BEND PROTECTIVE CORPORATION, INC.
Amendment to Articles of Incorporation

Gentlemen:

Enclosed please find the following:

1. One executed original and one copy of an Amendment to the Articles of Incorporation of CYPRESS BEND PROTECTIVE CORPORATION, INC.

2. Our check in the amount of $30.00 in payment of the following: (a) filing fee in the amount of $15.00; and (b) certified copy in the amount of $15.00.

Should you have any questions regarding this matter, you are authorized to call the undersigned collect.

Your cooperation in this matter is appreciated.

FILED
82 DEC -7 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Overpayment of C.C. fee $ 10.00

Very truly yours,

RUDEN, BARNETT, McCLOSKY,
SCHUSTER & RUSSELL

Mark F. Grant

Enclosures
MFG:lb

Name 12-6-82
Availability
Document Examiner GJ
Update 12/8
Verified DW 12-8
Acknowledgement AG
W. P. Typed 12/10

C. TAX
FILING 15
R. AGENT FEE
S. COPY 15
TOTAL 30
N. BANK
BALANCE DUE
REFUND

000 5 12/06/82 15.00 DS
000 12 12/06/82 15.00 DS

CERTIFICATE OF AMENDMENT TO THE
ARTICLES OF INCORPORATION OF
CYPRESS BEND PROTECTIVE CORPORATION, INC.
(A Florida Corporation Not-For-Profit)

FILED

We, the undersigned, being the President and Secretary of Cypress Bend Protective Corporation, Inc., a Florida corporation not-for-profit ("the "Corporation"), formed pursuant to Chapter 617, Florida Statutes, incorporated pursuant to the Corporation's Articles of Incorporation ("Articles") filed on the 19th day of February, 1973 in the office of the Secretary of State of the State of Florida, do hereby certify that:

1. Article XIII of the Articles provides that the Articles of Incorporation may be amended by the Board of Governors alone through an amendment adopted by the majority of the Board of Governors and certified by the President and attested by the Secretary or Assistant Secretary of the Corporation; and

2. The Board of Governors has by Written Consent to Action in Lieu of Special Meeting, pursuant to Section 607.134, Florida Statutes, unanimously adopted the Amendment to the Articles of Incorporation attached hereto as Exhibit A; and

3. The attached Amendment is a true copy of the Amendment to the Articles approved by the Board of Governors on November 1, 1982; and

4. The adoption and approval of the Amendment appears in the minutes of the Association and is unrevoked; and

5. Pursuant to the terms of the Resolution by the Board of Governors, this Amendment is to be effective on November 1, 1982.

IN WITNESS WHEREOF, this Certification of Amendment has been executed by the Association, this 1 day of December, 1982.

WITNESSES:

Delores P. Andersen

Mary E. Chapman

CYPRESS BEND PROTECTIVE CORPORATION, INC.

By: Peter W. Schwab
PETER W. SCHWAB, President

Attest:
ANTONIO NUNEZ, Secretary

CERTIFICATION

STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

I HEREBY CERTIFY that on this day, personally appeared before me, an officer duly authorized to take acknowledgements, PETER W. SCHWAB and ANTONIO NUNEZ, the President and Secretary, respectively, of CYPRESS BEND PROTECTIVE CORPORATION, INC., to me known to be the persons who signed the foregoing instrument as such officers and they severally acknowledged that the execution thereof was their free act and deed as such officers and for the uses and purposes therein expressed, and that the said instrument is the act and deed of said corporation.

WITNESS my hand and official seal in the County and State last aforesaid this 1st day of December, 1982.

Mary E. Chapman
Notary Public

My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES NOV 28 1985
BONDED THRU GENERAL INS., UNDERWRITERS

(SEAL)

EXHIBIT "A"

AMENDMENT TO
THE ARTICLES OF INCORPORATION OF
CYPRESS BEND PROTECTIVE CORPORATION, INC.

The Board hereby adopts the following amendment to Article X of the Articles of Incorporation:

The number of Members of the First Board of Governors (the "First Board") shall be ~~four-(4)~~ three (3) thereafter the number of Members of the Board shall be increased as provided in Section 3 of this Article.

Said Amendment to be effective November 1, 1982.

[Coding: Words in ~~struck through~~ type are deletions; words underlined are additions]

725590

3/28
RR

RUDEN, BARNETT, McCLOSKY, SCHUSTER & RUSSELL

ATTORNEYS AT LAW

ONE CORPORATE PLAZA • PENTHOUSE B
110 EAST BROWARD BOULEVARD
POST OFFICE BOX 1900
FORT LAUDERDALE, FLORIDA 33302
TELEPHONE (305) 764 - 6660
BOCA RATON 392 - 9771
MIAMI 944 - 3263
TELECOPIER 764 - 4990

ONE BISCAYNE TOWER • SUITE 2020
2 SOUTH BISCAYNE BOULEVARD
MIAMI, FLORIDA 33131
(305) 371 - 6262

PLEASE REPLY TO:

Ft. Lauderdale

March 16, 1983

086 0448 3/22/83 15.00 1Z
086 0448 3/22/83 15.00 TC

Secretary of State
Corporate Division
The Capitol
Tallahassee, FL 32304

Amend

Gentlemen:

Enclosed herewith is an Amendment to the Articles of Incorporation of Cypress Bend Protective Corporation, Inc., a not-for-profit corporation. The Articles for this Corporation were originally filed with the Secretary of State on the 19th day of February, 1973. Enclosed herewith also is a check for $15.00 to cover the filing fee for such document.

If you have any questions concerning the enclosed, please do not hesitate to contact the undersigned.

FILED
83 MAR 25 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Hold for exhibit "A" 3-23-83

Name Availability	3/28/83
Document Examiner	LP
Updater	3/25
Updater Verifyer	3/28
Acknowledgement	DB
W. P. Verifyer	3/28

Sincerely yours,

RUDEN, BARNETT, McCLOSKY, SCHUSTER & RUSSELL

Louise E. Tudzarov

Louise E. Tudzarov

djb
Enclosures

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

L. Tudzarov GAVE AUTHORIZATION BY PHONE TO CORRECT eff date

DATE 3-22-83

DOC. EXAM LP

RUDEN, BARNETT, McCLOSKY, SCHUSTER & RUSSELL
ATTORNEYS AT LAW

SIMON RUDEN (1915 - 1967)
ELLIOTT D. BARNETT
DONALD C. McCLOSKY
CARL SCHUSTER
TERRENCE RUSSELL
BRUCE D. GOORLAND
WOODROW "MAC" MELVIN, JR.
BENNETT FALK
BARRY A. MANDELKORN
GLENN N. SMITH
MICHAEL H. RAUL
WILLIAM H. LEFKOWITZ
MARK F. GRANT
SCOTT J. FUERST
JOHN L. FAROUHAR
STEPHEN O. McCANN
BARRY E. SOMERSTEIN
RICHARD E. BERMAN
BARRY E. CHAPNICK
ROBERT A. KRAMER
PETER D. SLAVIS
ROBERT A. PLATSKY
REED B. McCLOSKY
SARI K. AGATSTON
BELINDA PLUTZKY
MARIA R. LORTS
G. MICHAEL KEENAN
JOHN L. SHERMAN
LOUISE E. TUDZAROV
ROBERT BRODY
JODY H. OLIVER
GREGG W. McCLOSKY
SAUL J. MORGAN
THOMAS F. GUSTAFSON
CHRISTINE C. LEE
GILL S. FREEMAN
PATRICIA L. COWART
O'BANNON M. COOK
KEITH OLIN

ONE CORPORATE PLAZA • PENTHOUSE D
110 EAST BROWARD BOULEVARD
POST OFFICE BOX 1900
FORT LAUDERDALE, FLORIDA 33302
TELEPHONE (305) 764 - 6660
BOCA RATON 392 - 9771
MIAMI 944 - 3263
TELECOPIER 764 - 4998

ONE BISCAYNE TOWER • SUITE 2020
2 SOUTH BISCAYNE BOULEVARD
MIAMI, FLORIDA 33131
(305) 371 - 6262

PLEASE REPLY TO:
Ft. Lauderdale

FILED
1983 MAR 25 PM 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

March 23, 1983

Secretary of State
Corporate Division
The Capitol
Tallahassee, FL 32304

Attention: Louise Fleming
Personal and Confidential

RE: Amendment to Articles of Incorporation of Cypress Bend Protective Corporation, Inc.

Dear Ms. Fleming:

Enclosed herewith is Exhibit A to the certificate of Amendment. If there are any further problems, please do not hesitate to contact me. Thank you for your prompt attention and cooperation.

Sincerely yours,

RUDEN, BARNETT, McCLOSKY,
SCHUSTER & RUSSELL

Louise E. Tudzarov

djb
Enclosure

CERTIFICATE OF AMENDMENT TO THE
ARTICLES OF INCORPORATION OF
CYPRESS BEND PROTECTIVE CORPORATION, INC.
(A Florida Corporation Not-For-Profit)

FILED
1983 MAR 25 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We, the undersigned, being the President and Secretary of Cypress Bend Protective Corporation, Inc., a Florida corporation not-for-profit (the "Corporation"), formed pursuant to Chapter 617, Florida Statutes, incorporated pursuant to the Corporation's Articles of Incorporation ("Articles") filed on the 19th day of February, 1973 in the office of the Secretary of State of the State of Florida, do hereby certify that:

1. Article XIII of the Articles provides that the Articles of Incorporation may be amended by the Board of Governors alone through an amendment adopted by the majority of the Board of Governors and certified by the President and attested by the Secretary or Assistant Secretary of the Corporation; and

2. The Board of Governors has by Written Consent to Action in Lieu of Special Meeting, pursuant to Section 607.134, Florida Statutes, unanimously adopted the Amendment to the Articles of Incorporation attached hereto as Exhibit A; and

3. The attached Amendment is a true copy of the Amendment to the Articles approved by the Board of Governors on January 1, 1983; and

4. The adoption and approval of the Amendment appears in the minutes of the Association and is unrevoked; and

5. Pursuant to the terms of the Resolution by the Board of Governors, this Amendment is to be effective on January 1, 1983, for accounting purposes only.

IN WITNESS WHEREOF, this Certification of Amendment has been executed by the Association, this 25th day of February, 1983.

WITNESSES:

Arline Rogel

Dorothy E. Faught

CYPRESS BEND PROTECTIVE CORPORATION, INC.

By: Peter W. Schwab
PETER W. SCHWAB, President

Attest:
ANTONIO NUNEZ, Secretary

CERTIFICATION

STATE OF FLORIDA)
) SS:
COUNTY OF BROWARD)

I HEREBY CERTIFY that on this day, personally appeared before me, an officer duly authorized to take acknowledgements, PETER W. SCHWAB and ANTONIO NUNEZ, the President and Secretary, respectively, of CYPRESS BEND PROTECTIVE CORPORATION, INC., to me known to be the persons who signed the foregoing instrument as such officers and they severally acknowledged that the execution thereof was their free act and deed as such officers and for the uses and purposes therein expressed, and that the said instrument is the act and deed of said corporation.

WITNESS my hand and official seal in the County and State last aforesaid this 25th day of February, 1983.

Dorothy E. Faught
Notary Public

My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXPIRES SEPT 1 1986
BONDED THRU GENERAL INSURANCE UND

(SEAL)

EXHIBIT "A"

AMENDMENT TO
THE ARTICLES OF INCORPORATION OF
CYPRESS BEND PROTECTIVE CORPORATION, INC.

The Board hereby adopts the following amendment to Article X of the Articles of Incorporation:

The number of Members of the First Board of Governors (the "First Board") shall be ~~three (3)~~ six (6) thereafter the number of Members of the Board shall be increased as provided in Section 3 of this Article.

Said Amendment to be effective January 1, 1983, for accounting purposes only.
[Coding: Words in ~~struck through~~ type are deletions; words underlined are additions]

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1983

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

725590
CYPRESS BEND PROTECTIVE CORP INC
1151 N.W. 24TH STREET
POMPANO BEACH, FL. 33064

If above address is incorrect or is not complete, enter correct address in Item 2. Include Zip Code

2. Enter Change of Address or Complete Address if None Was Given (Do Not P.O. Box Number Unless Address is NOT Available)

Street Address:
P.O. Box No.:
City:
State: Zip Code:

3. Date Incorporated or Qualified To Do Business in Florida: 02/19/1973

4. Federal Employer Identification Number (FEIN): 59-1577748

5. Date of Last Report: 05/27/1982

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
LEVY, R D	V	1151 N W 24TH STREET	POMPANO BEACH, FL	0000
SCHWAB, P W	P/D	1151 N W 24TH STREET	POMPANO BEACH, FL	0000
NUNEZ, A	S/T/D	1151 N W 24TH STREET	POMPANO BEACH, FL	0000
PFUND, P C	D	1151 N W 24TH STREET	POMPANO BEACH, FL	0000
Young, Robert F.	P/D	1151 N.W. 24 Street	Pompano Beach, Fl.	
Hirdler, Edgar	D	2206 Cypress Bend Dr. S. #301	Pompano Beach, Fl.	
Greenbaum, Bernard	D	2320 Cypress Bend Dr. S. #D-301	Pompano Beach, Fl.	

Registered Agent Information

7. Name and Address of Current Registered Agent

NUNEZ,A.
1151 N.W. 24TH STREET
POMPANO BEACH,FL 33064

8. Name and Address of New Registered Agent

Name:
Street Address (Do NOT Use P.O. Box Number):
City, State and Zip Code:

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As if Made Under Oath.

Signature		Date
		5/17/83
Typed Name of Signing Officer	**Title**	**Telephone Number**
A. Nunez	Secretary/Treasurer	(305) 972-7660

CR2E023 (1/83)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT 1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

JUN 13 AM 1984

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $10 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

725590
CYPRESS BEND PROTECTIVE CORPORATION, INC.
1151 N.W. 24TH STREET
POMPANO BEACH, FL. 33064

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No

City

State Zip Code

3. Date Incorporated or Qualified To Do Business In Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report:
02/19/1973	59-1577746	05/31/1983

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
1	SCHWAB, P N	D	1151 NW 24TH ST	POMPANO BCH, FL	0000
2	YOUNG, ROBERT F	P/D	1151 NW 24TH ST	POMPANO BCH, FL	0000
3	LEVY, R D	V	1151 NW 24TH ST	POMPANO BCH, FL	0000
4	HIRDLER, EDGAR	D	2206 CYPRESS BEND DR S	POMPANO BCH, FL	0000
5	PFUND, P C	D	1151 NW 24TH ST	POMPANO BCH, FL	0000
6	NUNEZ, A	S/T	1151 NW 24TH ST	POMPANO BCH, FL	0000
	LEVY, RICHARD D	V/D	1151 N.W. 24TH ST	POMPANO BCH, FL	0000
	D'ADDARIO, MERLE	D	1151 N.W. 24TH ST	POMPANO BCH, FL	0000
	LEVY, JO ANN	D	1151 N.W. 24TH ST	POMPANO BCH, FL	0000

Registered Agent Information

7. Name and Address of Current Registered Agent

NUNEZ, A.
1151 N.W. 24TH STREET
POMPANO BEACH, FL 33064

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

Signature	Date
	6/15/84

Typed Name of Signing Officer	Title	Telephone Number
Antonio Nunez	Secretary/Treasurer	(305) 972-7660

11. *Should you desire a certificate of status check the box below and include an additional $5.00 with your payment.*

CERTIFICATE OF STATUS DESIRED ☐
$5 Additional fee required for certificates.

COR 620 (1-84)

GREENBAUM, BERNARD	D	2320 CYPRESS BEND DR. S. #301	POMPANO BCH, FL
BROCKWAY, CHARLES	D	2200 CYPRESS BEND DR. S. #803	POMPANO BCH, FL
BOGDANOFF, ROBERT	D	2320 CYPRESS BEND DR. S. #401	POMPANO BCH, FL

DUE DATE ON OR AFTER JANUARY 1 DECEMBER 31 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1985

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

1. Name and address of Corporation Principal Office

725590 4
CYPRESS BEND PROTECTIVE CORPORATION, INC.
1151 N.W. 24TH. STREET
POMPANO BEACH, FL. 33064

2. If above Address is not Principal Office, enter the correct Address or Item 2. Include Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 02/19/1973

4. Federal Employer Identification No.: 59-1577746

5. Fiscal Year Ended: 07/09/1984

6. Names and Street Addresses of Each Officer and Director as of December 31, 1984

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	LEVY, RICHARD D	V/D	1151 NW 24TH ST	POMPANO BCH, FL 0000
2	YOUNG, ROBERT F	P/D	1151 NW 24TH ST	POMPANO BCH, FL 0000
3	D'ADDARIO, NEALE	D	1151 NW 24TH ST	POMPANO BCH, FL 0000
4	HINDLER, EDGAR	D	2206 CYPRESS BEND DR S	POMPANO BCH, FL 0000
5	LEVY, JO ANN	D	1151 NW 24TH ST	POMPANO BCH, FL 0000
6	NUNEZ, A	S/T	1151 NW 24TH ST	POMPANO BCH, FL 0000

Registered Agent Information

7. Name and Address of Current Registered Agent

NUNEZ,A.
1151 N.W. 24TH STREET
POMPANO BEACH,FL 33064

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute this Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. (Officer signing must be listed in Block 6):

Signature	Date
Patricia C. Pfund	4/30/85

Typed Name of Signing Officer	Title	Telephone Number
Patricia C. Pfund	Asst. Secretary/Asst. Treas.	(305) 972-7660

11. Should you desire a certificate of status check the box. CERTIFICATE OF STATUS DESIRED ☐

$5 additional fee required for a Certificate of Status

CR2E051 (1-85)

ADDITION TO BLOCK #6.

NAMES OF OFFICERS & GOVERNORS	TITLE	STREET ADDRESS	CITY & STATE
D'ADDARIO, MERLE	P/G	1151 N.W. 24TH STREET	POMPANO BEACH, FL.
LEVY, RICHARD D	VP/G	1151 N.W. 24TH STREET	POMPANO BEACH, FL.
BROCKWAY, CHARLES	VP/G	2200 CYPRS. BD. DR. S.	POMPANO BEACH, FL.
LEVY, JO ANN	S/T/G	1151 N.W. 24TH STREET	POMPANO BEACH, FL.
PFUND, PATRICIA C.	AS/AT/G	1151 N.W. 24TH STREET	POMPANO BEACH, FL.
STEIN, AL	G	2202 CYPRS. BD. DR. S.	POMPANO BEACH, FL.
LODER, MARC	G	2310 CYPRS. BD. DR. S.	POMPANO BEACH, FL.
BOGDANOFF, ROBERT	G	2320 CYPRS. BD. DR. S.	POMPANO BEACH, FL.

D. W. McKinnon, Director
Division of Corporations
904/487-6000

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State

Mrs. Nettie Sims, Chief
Bureau of Corporate Records
904/487-6000

725590

April 2, 1986

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of Chapter 607.037 (3), Florida Statutes, the undersigned, A. Nunez, hereby resigns as
(Name of Registered Agent)

Registered Agent for CYPRESS BEND PROTECTIVE CORP, INC.
(Name of Corporation)

A copy of this resignation was mailed to the above listed corporation at its last known address.

Said resignation will take effect thirty (30) days after receipt of such notice and payment of fee to the Department of State.

Signature

FILED
86 APR 9 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THERE IS A $3.00 FEE FOR FILING THIS DOCUMENT.

TJAB

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1986

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

725590
CYPRESS BEND PROTECTIVE CORPORATION, INC.
1151 N.W. 24TH STREET
POMPANO BEACH, FL. 33064

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2 Enter Change of Address of Corporation Principal Office P.O. Box Number Alone is NOT Sufficient

Street Address 21: 2204 Cypress Bend Dr. So.

P.O. Box No. 22:

City and State 23: Pompano Beach, Florida

Zip Code 24: 33069

3 Date Incorporated or Qualified To Do Business in Florida	4 Federal Employer Identification Number (FEIN)	5 Date of Last Report
02/19/1973	59-1577746	06/14/1985

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1985

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
A.L. Stein	P/D	2202 Cypress Bend Dr.S.	Pompano Beach, Fla. 33069
Chuck Brockway	V/D	2200 Cypress Bend Dr.S.	Pompano Beach, Fla. 33069
David Caulkett	T/D	2320 Cypress Bend Dr.S.	Pompano Beach, Fla. 33069
Ginny Lonow	S/D	2320 Cypress Bend Dr.S.	Pompano Beach, Fla. 33069
Jerry Ruskin	D	2112 Cypress Bend Dr.S.	Pompano Beach, Fla. 33069
Barbara Greenfield	D	2108 Cypress Bend Dr.S.	Pompano Beach, Fla. 33069
Morris Weinstein	D	2209 Cypress Bend Dr.S.	Pompano Beach, Fla. 33069
Dwayne Hoble	D	2216 Cypress Bend Dr.S.	Pompano Beach, Fla. 33069
Ed B[illegible]	T	2206 Cypress Bend Dr.S.	Pompano Beach, Fla. 33069

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

A.L. Stein
2202 Cypress Bend Dr.So.
Pompano Beach, Fla. 33069
607

8 Name and Address of New Registered Agent

Name 81: Same

Street Address (Do NOT Use P.O. Box Number) 82:

City and State 83: FL

Zip Code 84:

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

CR2E034 (1-85)

See signature restrictions under instructions on reverse side of this form.

10. I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer signing must be listed in Block 6)

Signature: A L Stein President

Date: 6-23-86

Typed Name of Signing Officer: A L Stein President

Title: President

Telephone Number: 9710115

11. Should you desire a certificate of status check the box. CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED
87 APR 28 PM 12:41

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

725590
CYPRESS BEND PROTECTIVE CORPORATION, INC.
2204 CYPRESS BEND DR. S
POMPANO BCH, FL 33069

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21: 2301 CYPRESS BEND DR. S.
P.O. Box No. 22:
City and State 23:
Zip Code 24:

3. Date Incorporated or Qualified To Do Business in Florida: 02/19/1973
4. Federal Employer Identification Number (FEIN): 59-1577746
5. Date of Last Report: 06/30/1986

6. Names and Street Addresses of Each Officer and Director as of December 31, 1986

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
~~STEIN, ARLE~~	P/D	2204 CYPRESS BEND DR. S	POMPANO BCH, FL
~~BROEKMAN, CHUCK~~	V/D	2204 CYPRESS BEND DR. S	POMPANO BCH, FL
~~GAULKETT, DAVID~~	T/D	2204 CYPRESS BEND DR. S	POMPANO BCH, FL
~~LONOW~~	S/D	2204 CYPRESS BEND DR. S	POMPANO BCH, FL
~~ROSKIN, JERRY~~	D	2204 CYPRESS BEND DR. S	POMPANO BCH, FL
~~GREENFIELD, BARBARA~~ (SEE ATTACHED LIST)	D	2204 CYPRESS BEND DR. S	POMPANO BCH, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

2204 CYPRESS BEND DR. S
POMPANO BCH, FL 33069

8. Name and Address of New Registered Agent

Name 81:
Street Address 1 (Do NOT Use P.O. Box Number) 82:
Street Address 2 (Do NOT Use P.O. Box Number) 83:
City and State 84: FL.
Zip Code 85:

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on: _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE: Virginia L. Lonow, Treasurer (Registered Agent Accepting Appointment) DATE: 4/27/87

$3.00 additional fee required for Registered Agent changes

10. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Block 6).

Signature: Virginia L. Lonow President for the Board
Date: 2-19-87
Typed Name of Signing Officer: VIRGINIA L. LONOW
Title: President for the Board
Telephone Number:

11. Should you desire a certificate of status check the box: CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

CR2E031 (11/86)

CYPRESS BEND PROTECTIVE CORP., INC.
c/o PROTECTIVE CLUBHOUSE
2301 CYPRESS BEND DRIVE SOUTH
POMPANO BEACH, FLA. 33069
972-8880

GOVERNORS

Virginia L. Lonow — President
2304 Cypress Bend Drive South
Apt. #515
Pompano Beach, Florida 33069
Telephone - 971-7129

Larry Kiceina — Vice President
2209 Cypress Bend Drive South
Bldg. #7 - Apt. #502
Pompano Beach, Florida 33069
Telephone - 971-7894

Morris Weinstein — Treasurer
2209 Cypress Bend Drive South
Bldg. #7 - Apt. #208
Pompano Beach, Florida 33069
Telephone - 973-0714

Dwayne Noble — Secretary
2108 Cypress Bend Drive South
Bldg. #10 - Apt. #408
Pompano Beach, Florida 33069
Telephone - 973-4915

Jim Pedersen
2304 Cypress Bend Drive South
Apt. #211
Pompano Beach, Florida 33069
Telephone - 973-2932

Dorothy Brockway
2200 Cypress Bend Drive South
Bldg. #6 - Apt. #803
Pompano Beach, Florida 33069
Telephone - 975-0578

A.L. Stein
2200 Cypress Bend Drive South
Bldg. # 6 - Apt. #105
Pompano Beach, FL 33069
Telephone 973-8170 - 971-0119

Robert Engleson
2108 Cypress Bend Drive South
Bldg. #10 - Apt. #502
Pompano Beach, Florada 33069
Telephone - 972-4750 (Work) 491-6240

Jo Ann Levy
%Oriole Homes Inc.
1151 N.W. 24th Street
Pompano Beach, Florida 33064
Telephone 972-7660

Merle D'Addario
%Oriole Homes Inc.
1151 N.W. 24th Street
Pompano Beach, Florida 33064
Telephone - 972-7660

FILE NOW, OR THIS CORPORATION WILL BE DISSOLVED ON NOVEMBER 4, 1988!

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Read Notes and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required — Make Checks Payable To Secretary of State

1. Name and Address of Corporation Principal Office

725590 4
CYPRESS BEND PROTECTIVE CORPORATION, INC.
~~2301 CYPRESS BEND DR. S~~
POMPNO BCH, FL 33069

2. Enter Change of Address or Corporation Principal Office PO Box Number Address NOT Sufficient

Street Address 21: 2301 CYPRESS BEND DR. SO.
PO Box No 22:
City and State 23: POMPANO BEACH, FLORIDA
Zip Code 24: 33069

If above address is incorrect in any way, enter the correct address in item 2 including Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 02/19/1973
4. Federal Employer Identification Number (FEI): 59-1577746
5. Date of Last Report: 04/28/1987

6. Names and Street Addresses of Each Officer and Director as of December 31, 1987

Names of Officers and Directors	Title	Street Address of Each Officer and Director (DO NOT Use Post Office Box Numbers)	City and State
~~STEVE JACONETTI~~ ~~DOROWY, VIRGINIA L.~~	P/D	2217 CYPRESS ISLAND DRIVE ~~2301 CYPRESS BEND DR S~~	POMPNO BCH, FL
JIM VANDER VLIS ~~KIOBINA, LARRY~~	V/D	2309 CYPRESS BEND DR. SO. ~~2301 CYPRESS BEND DR S~~	POMPNO BCH, FL
ARLENE FOX ~~WEINSTEIN, MORRIS~~	T/D	2205 CYPRESS BEND DR. SO. ~~2301 CYPRESS BEND DR S~~	POMPNO BCH, FL
HOBLE, DWAYNE	S/D	2301 CYPRESS BEND DR S	POMPNO BCH, FL
~~PEDERSEN, JIM~~	~~D~~	~~2301 CYPRESS BEND DR S~~	~~POMPNO BCH, FL~~
JIM NONAGHAN BROCKWAY, DOROTHY	D	2222 CYPRESS BEND DR.N. 2301 CYPRESS BEND DR S	POMPNO BCH, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

~~SCBIN, A. Le~~
~~2206 CYPRESS BEND DR., S. POMP~~
POMPANO BEACH, FL 33069

8. Name and Address of New Registered Agent

Name 31: ED BENNETT
Street Address 1 (Do NOT Use PO Box Number) 32: 2206 CYPRESS BEND DR. SO.
Street Address 2 (Do NOT Use PO Box Number) 33:
City and State 34: POMPANO BEACH, FLORIDA
Zip Code 35: FL. 33069

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.035 F.S.

SIGNATURE: Edward Bennett (Registered Agent Accepting Appointment) DATE: AUGUST 23, 1988

10. If a foreign corporation, state first transaction of business in Florida: _____

11. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer or Director signing must be listed in Block 6.)

Signature: Steve Jaconetti
Date: AUGUST 23, 1988
Typed Name of Signing Officer or Director: STEVE JACONETTI
Title: PRESIDENT
Telephone Number: 972-8880

12. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

CR2EC24 (1-88)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

725590 4
CYPRESS BEND PROTECTIVE CORPORATION, INC.
2301 CYPRESS BEND DR. SO.
POMPNO BCH, FL 33069-4485

* Above Address is Incorrect (In this box, enter the correct address in Item 2. Include Zip Code)

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

03/03/89 00015 011

ANNUAL REPORT

3. Date Incorporated or Qualified To Do Business in Florida: 02/19/1973

4. Federal Employer Identification Number (FEI): 59-1577746

ANNUAL REPORT Last Report: 08/29/1988

35.00

TOTAL 35.00

6. Names and Street Addresses of Each Officer and Director as of December 31, 1988

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
1	P/R	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
2	PRES.	JIM VANDER VLIS	2309 CYPRESS BEND DR. SO.	POMPANO BEACH, FL.
2a	D/R	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
3	VP	A.I. STEIN	2202 CYPRESS BEND DR. SO.	POMPANO BEACH, FL.
3a	T/D	FOX, ARLENE	2205 CYPRESS BEND DR. S	POMPNO BCH, FL
4	S/D	HOBLE, DWAYNE	2301 CYPRESS BEND DR S	POMPNO BCH, FL
5	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
5a				
6	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX
6a				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

BERNETT, ED
2206 CYPRESS BEND DR. S.
POMPANO BEACH, FL 33069

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, now operated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE _____ DATE _____
(If Registered Agent Accepting Appointment)

10. If a foreign corporation, date first transacted business in Florida _____

11. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer or Director signing must be listed in Block 6.)

Signature: James E. Vander Vlis President — Date: Feb 15, 1989

Typed Name of Signing Officer or Director: JAMES E. VANDER VLIS — Title: PRESIDENT — Telephone Number: 305-972-8880

12. Should you desire a certificate of status check the box. CERTIFICATE OF STATUS DESIRED ☐ — $5 Additional Fee required for a Certificate of Status

DSCR95175

CRGE034 (1-88)

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

APPROVED AND FILED

CORPORATION

ANNUAL REPORT

1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

1990 MAR 30 PM 1:08

FLORIDA DEPARTMENT OF STATE
CORPORATE FILING DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

725590 4

ZIP + 4 PRESORT

CYPRESS BEND PROTECTIVE CORPORATION, INC.
2301 CYPRESS BEND DR. SO.
POMPNO BCH, FL 33069-4485

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 02/19/1973

4. FEI Number: 59-1577746

☐ FEI Number Applied For
☐ FEI Number Not Applicable

5. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
1 P/D	VLIS, JIM VANDER	2309 CYPRESS BEND DR S	POMPANO BEACH, FL
2 V	STEIN, A L	2202 CYPRESS BEND DR S	POMPANO BEACH, FL
3 T/D	FOX, ARLENE	2205 CYPRESS BEND DR. S	POMPNO BCH, FL
4 S/D	HOBLE, DWAYNE	2301 CYPRESS BEND DR S	POMPNO BCH, FL
5			
6			

7. Name and Address of Current Registered Agent

BERNETT, ED
2206 CYPRESS BEND DR. S.
POMPANO BEACH, FL 33069

8. Name and Address of New Registered Agent

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. To the best of my knowledge and belief, I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; I further certify 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, F.S.

Signature: Virginia L. Lonow — Assistant for the Board — Date: 3/2/90

Typed Name of Signing Officer or Director: VIRGINIA L. LONOW

Title: PRESIDENT FOR THE BOARD

Telephone Number: 305-971-7129

11. Should you desire a certificate of status check the box: CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee Required for a Certificate of Status

CYPRESS BEND PROTECTIVE CORP., INC. 972-8880
PROTECTIVE CLUBHOUSE
2301 CYPRESS BEND DRIVE SOUTH
POMPANO BEACH, FLORIDA 33069

February 6, 1990

Division of Corporations
Annual Reports
Caller Service #1500
Tallahassee, FL 32302-1500

Gentlemen:

This is a list of the newly elected officers. Please make the following changes:

PRESIDENT - Virginia Lonow 2304 Cypress Bend Dr S Pompano Beach, FL

VICE PRES - Jerry Ruskin - 2112 Cypress Bend Dr S Pompano Beach, FL

T/D - Robert Moser - 2324 Cypress Bend Dr S Pompano Beach, FL

SECRETARY - Dwayne Noble - 7761 N. W. 23rd St., Margate, FL

REGISTERED AGENT IS Virginia Lonow 2304 Cypress Bend Dr S Pompano Beach, FL

Very truly yours,

CYPRESS BEND PROTECTIVE CORP., INC

VIRGINIA LONOW
President

VL:br
enc.

CYPRESS BEND PROTECTIVE CORP., INC. 972-8880
PROTECTIVE CLUBHOUSE
2301 CYPRESS BEND DRIVE SOUTH
POMPANO BEACH, FLORIDA 33069

725590

May 21, 1990

-05/24/90--00153--004
REGISTERED AGENTS
REGISTERED AGENT--****20.00
==========
TOTAL----------****20.00

Division of Corporations
Amendment Section
P. O. Box 6327
Tallahassee, Fl. 32314

Gentlemen:

I am enclosing amended affidavit of changes in officers, and check for $20.00 filing fee.

Please send me a print out of corrected list of officers.

Sincerely yours,

CYPRESS BEND PROTECTIVE CORP.

Barbara Ross

BARBARA ROSS
OFFICE MANAGER

FILED
90 MAY 24 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BR/
enc.

Name Availability
Document
Verifyer
W. P. Verifyer

Filing 20

AFFIDAVIT AMENDING OFFICERS AND/OR DIRECTORS

STATE OF FLORIDA :
COUNTY OF BROWARD :

I, the undersigned, after being duly sworn, state that to the best of my knowledge, information and belief, and under the penalties of perjury, the following is true and correct:

The name of the corporation is:
CYPRESS BEND PROTECTIVE CORPORATION, INC.

FILED
1990 MAY 24 PM 02:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The current names and addresses of the officers are:

Title(s)	Names	Addresses
PRES.	VIRGINIA LONOW	2304 Cypress Bend Dr S Pompano Beach FL
VICE PRES	JERRY RUSKIN	2112 Cypress Bend Dr S Pompano Beach FL
TREAS.	JAMES M. JOHNSON	2303 Cypress Bend Dr S Pompano Beach FL
SECY	A. L. STEIN	2202 Cypress Bend Dr S Pompano Beach FL

The current names and addresses of the directors are:

Names	Addresses
SAME AS ABOVE	

The above listed officers and/or directors were elected by the members, directors, or shareholders in accordance with the provisions of Chapter 617, Florida Statutes, or 607, Florida Statutes.

Virginia L. Lonow President
Signature of Officer/Director

Sworn to and subscribed before me this 17 day of May 19 90.

Irene D. Manaro.
Notary Public

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP. JULY 21,1992
BONDED THRU GENERAL INS. UND.

My commission Expires: _____ (seal)

INHSE 2 (8-89)

Filing Fee: $20

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED
FEB-3 '91

CORPORATION ANNUAL REPORT 1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Read Instructions on Other Side Before Making Entries

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation DOCUMENT #725590 (4)

ZIP + 4 PRESORT

CYPRESS BEND PROTECTIVE CORPORATION, INC.
2301 CYPRESS BEND DR. SO.
POMPANO BEACH, FL 33069-4485

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 02/19/1973

4. FEI Number: 59-1577746

FEI Number Applied For ☐

FEI Number Not Applicable ☐

5. $8.75 Additional Fee required for a Certificate of Status. CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
1	P/D	LONOW, VIRGINIA	2304 CYPRESS BEND DR S	POMPANO BEACH, FL
2	V/D	RUSKIN, JERRY	2112 CYPRESS BEND DR S	POMPANO BEACH, FL
3	T/D	JOHNSON, JAMES M.	2313 CYPRESS BEND DR S	POMPANO BEACH, FL
4	~~S/D~~	~~STEIN, ...~~	~~2202 CYPRESS BEND DR S~~	~~POMPANO BEACH, FL~~
5	S/D	JOHNSON, JAMES M	2313 CYPRESS BEND DR S	POMPANO BEACH, FL
6				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

~~BERNETT, ED~~
~~2206 CYPRESS BEND DR S~~
~~POMPANO BEACH FL 33069~~

8. Name and Address of New Registered Agent

81 Name: VIRGINIA LONOW

82 Street Address 1 (Do NOT Use P.O. Box Numbers): 2304 CYPRESS BEND DR S

83 Street Address 2 (Do NOT Use P.O. Box Number):

84 City: POMPANO BEACH FL FL.

85 Zip Code: 33069

9. 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: Virginia L. Lonow (Registered Agent Accepting Appointment) DATE: 2/1/91

10. I 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. I further certify 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 6 or on an attachment with an address.

SIGNATURE: Virginia L. Lonow DATE: 2/1/91

Typed Name of Signing Officer or Director: VIRGINIA LONOW

Title: PRESIDENT

Telephone Number Daytime: (305-) 971-7129 / 972-8880

FILING FEE OF $61.25 REQUIRED — Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status

CR2E034(1/88)

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION ANNUAL REPORT 1992

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
MAY-8'92
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

DO NOT WRITE IN THIS SPACE

Read Instructions on Other Side Before Making Entries

FILING FEE $61.25 Make Payable To: Secretary of State

1. Name and Mailing Address of Corporation: DOCUMENT #725590 (4)

CYPRESS BEND PROTECTIVE CORPORATION, INC.
2301 CYPRESS BEND DR. SO.
POMPANO BEACH FL 33069-4485

If above address is incorrect in any way, line through the incorrect information and enter correct address in Box 2

2. If Address in Block 1 is incorrect, mark out the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State | 24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 02/19/1973

3a. Date of Last Report: 02/08/1991

4. FEI Number: 59-1577746

FEI Number Applied For ☐
FEI Number Not Applicable ☐

5. $8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
1	P/D	LONOW, VIRGINIA	2304 CYPRESS BEND DR S	POMPANO BEACH, FL
1x				
2	V/D	SPAHLINGER, JOHN	2112 Cypress Bend Dr S	POMPANO BEACH, FL
2x				
3	S/D	STEIN, ELAINE	2214 Cypress Bend Dr S	POMPANO BEACH, FL
3x				
4	S/D	FOX, ARLENE	2205 Cypress Bend Dr S	POMPANO BEACH, FL
4x				
5				
5x				
6				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

LONOW, VIRGINIA
2304 CYPRESS BEND DR S
POMPANO BCH 33069

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City | FL | 85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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. Subject to the provisions of the corporation's charter or articles. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

11. I 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; I further certify 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 or Chapter 617, Florida Statutes; and that my name appears in Block 1 or Block 2 above, or I have entered my name and address in the blocks.

SIGNATURE Virginia L. Lonow DATE 3-5-92

Typed Name of Signing Officer or Director | Title | Telephone Number ( )

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional $5.00 to the filing fee. ☐

CR2E034 (11-91)

File Now. Filing Fee after May 1 is $225.00

FILED
93 MAY 27 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 725590 (4)

1. Name and Mailing Address of Corporation

CYPRESS BEND PROTECTIVE CORPORATION, INC.
2301 S CYPRESS BEND DR
POMPANO BEACH FL 33069-4485

If above mailing address is incorrect in any way, strike through incorrect information and print correction in Block 2.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/19/1973
3a. Date of Last Report: 05/08/1992

FILING FEE - $700.00
ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

4. FEI Number: 591577746 — Applied For ☐ Not Applicable ☐

2. Mailing Address
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Principal Place of Business
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

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

6. Filed Copy Desired ☐ — $5.00 May be Added to Fees

7. Registered with IRS 501(c)(3) Tax Exempt Status ☐ — $138.75 Supplemental Fee Not Required

8. This corporation has elected to be governed by the Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LONOW, VIRGINIA
2304 CYPRESS BEND DR S
POMPANO BCH 33069

10. Name and Address of New Registered Agent

81 Name: STEIN, ELAINE F.
82 Street Address (P.O. Box Number is Not Acceptable): 2214 CYPRESS BEND DRIVE SOUTH
83 #207
84 City: Pompano Beach 85 State: FL 86 Zip: 33069 87 Country: USA

11. Pursuant to the provisions of Sections 607.0502 and 607.1503 or Sections 617.0502 and 617.1508, 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 to such corporation and agree to comply with the provisions of Section 607.0505, Florida Statutes.

SIGNATURE: by Elaine F. Stein Pres. DATE: 5-13-93
(Required for Any Adding Amendment)

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS CHANGES	
1.1 TITLE	P/D	1.1 TITLE	PRESIDENT P/D
1.2 NAME	LONOW, VIRGINIA	1.2 NAME	STEIN, ELAINE F.
1.3 ADDRESS	2304 CYPRESS BEND DR S	1.3 ADDRESS	2214 CYPRESS BEND DR., SOUTH #207
1.4 CITY-ST-ZIP	POMPANO BEACH FL	1.4 CITY-ST-ZIP	POMPANO-BEACH,-FL-33068
2.1 TITLE	V/D	2.1 TITLE	VICE-PRESIDENT V/D
2.2 NAME	SPAHLINGER, JOHN	2.2 NAME	TRACHT, BRUCE R.
2.3 ADDRESS	2112 CYPRESS BEND DR S	2.3 ADDRESS	2221 CYPRESS BEND DR.SO., #708
2.4 CITY-ST-ZIP	POMPANO BEACH FL	2.4 CITY-ST-ZIP	POMPANO-BEACH,-FL-33069
3.1 TITLE	S/D	3.1 TITLE	SECRETARY S/D
3.2 NAME	STEIN, ELAINE	3.2 NAME	PETERS, BARBARA
3.3 ADDRESS	2214 CYPRESS BEND DR S	3.3 ADDRESS	2217 CYPRESS BEND DR., SO. #205
3.4 CITY-ST-ZIP	POMPANO BEACH FL	3.4 CITY-ST-ZIP	POMPANO-BEACH,-FL-33069
4.1 TITLE	S/D	4.1 TITLE	TREASURER T/D
4.2 NAME	FOX, ABILENE	4.2 NAME	LONOW, VIRGINIA L.
4.3 ADDRESS	2205 CYPRESS BEND DR S	4.3 ADDRESS	2304 CYPRESS BEND DR., SO.#515
4.4 CITY-ST-ZIP	POMPANO BEACH FL	4.4 CITY-ST-ZIP	POMPANO-BEACH,-FL-33069
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	
5.3 ADDRESS		5.3 ADDRESS	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 ADDRESS		6.3 ADDRESS	
6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP	

200100084382
-052793-01012-021
****200.00 ****200.00
TEH 5/27/93 fm

14. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall be the same as required by s. 607.0502(3) or s. 617.0502(3), Florida Statutes, and that my name appears in Block 12, Block 13 if changed, or on an attachment with an address.

SIGNATURE: by Elaine F. Stein Pres. DATE: 2-12-93

Print/Type Name of Signing Officer or Director: ELAINE F. STEIN
Title(s): PRESIDENT
Daytime Telephone Number: (305) 972-8880

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
94 MAY -1 PM 12:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name
CYPRESS BEND PROTECTIVE CORPORATION, INC.

DOCUMENT # 725590 (4)

Mailing Address
2301 CYPRESS BEND DR. SO.
POMPANO BEACH FL 33069

Principal Place of Business
2301 CYPRESS BEND DR. SO.
POMPANO BEACH FL 33069

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/19/1973
3a. Date of Last Report: 05/27/1993

2. Mailing Address (21)
2a. Principal Place of Business (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 59-1577746 — 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

7. Nonprofit Exempt from $139.75 Supplemental Fee ☐

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

~~STEIN ELAINE F~~
~~2214 CYPRESS BEND DR. S.~~
~~STE. #207~~
~~POMPANO BCH FL 33069~~

10. Name and Address of New Registered Agent

81 Name: JOHN MARQUETTE
82 Suite/Address (P.O. Box Number is Not Acceptable): 2108 Cypress Bend Dr. S. # 508
83
84 City: Pompano Beach FL 85 Zip Code: 33069

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Registered Agent Accepting Appointment (NOTE: Registered Agent must sign if name is listed above as new agent)

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	P/D	11 TITLE	P/D
12 NAME	STEIN ELAINE F	12 NAME	MARQUETTE JOHN
13 STREET ADDRESS	2214 CYPRESS BEND DR. S., #207	13 STREET ADDRESS	2108 CYPRESS BEND DR. S#508
14 CITY-ST-ZIP	POMPANO BEACH FL 33068	14 CITY-ST-ZIP	POMPANO BEACH, FL. 33069
21 TITLE	V/D	21 TITLE	V/D
22 NAME	TRACHT BRUCE R	22 NAME	LONOW VIRGINIA
23 STREET ADDRESS	2221 CYPRESS BEND DR. S. #708	23 STREET ADDRESS	2304 Cypress Bend Dr. S.#515
24 CITY-ST-ZIP	POMPANO BEACH FL 33069	24 CITY-ST-ZIP	Pompano Beach Fl. 33069
31 TITLE	S/D	31 TITLE	S/D
32 NAME	PETERS BARBARA	32 NAME	BERNETT SYLVIA
33 STREET ADDRESS	2217 CYPRESS B END DR. S. #205	33 STREET ADDRESS	2206 Cypress Bend Dr. S. #201
34 CITY-ST-ZIP	POMPANO BEACH FL 33069	34 CITY-ST-ZIP	Pompano Beach, Fl 33069
41 TITLE	T/D	41 TITLE	T/D
42 NAME	LONOW VIRGINIA L	42 NAME	BERNETT SYLVIA
43 STREET ADDRESS	2304 CYPRESS BEND DR. S. #515	43 STREET ADDRESS	2206 Cypress Bend Dr. S #201
44 CITY-ST-ZIP	POMPANO BEACH FL 33069	44 CITY-ST-ZIP	Pompano Beach, Fl 33069
51 TITLE		51 TITLE	
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY-ST-ZIP		54 CITY-ST-ZIP	
61 TITLE		61 TITLE	
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Virginia L. Lonow Vice President 4/25/94 305-972-8880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #