## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

757989

(9)

## CYPRESS CATHEDRAL HOUSING, INC.

Principal Place of Business		Mailing Address		T NOBELLO APRODE MINEL PAREID AMENDE AMENDE AMENDE	INEI GLOSA BEBEI GLOOF BENTAL BENTA GLOOF 1881	
		1801 HAVENDALE BLVD WINTER HAVEN FL 33881-	1225			
					3. Date incorporated or Qualified 05/11/1981	3a. Date of Last Report 04/24/1996
	ace of Business	2a. Mailing Address			4. FE! Number	Applied For
21		26			59-2099974	Not Applicable
Suite, Apt.	#, elC	Suite, Apt. #, etc.	27 Suile, Apr. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & State		6. Election Campaign Financing	\$5.00 May Be
23			28		Trust Fund Contribution	Added to Fees
Zip			Country	· · · · · · · · · · · · · · · · · · ·	8. This corporation has liability for i	
24	25	29	30		Florida Statutes	Yes No
					10. Name and Address of New Re	glatered Agent
			81	Name		
EDWARDS, DWIGHT			62	Street Addr	ess (P.O. Box Number is Not Acceptab	le)
1801 HAVENDALE BLVD WINTER HAVEN FL 33881			83		······································	
WINTER FLAVER PL 33001				1		
•			84	City		FL 85 Zip Code
11. Pursuant to the provisions of 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 617.0503, Florida Statutes.						
agent. La	m familiar with, and accept the obli	gations of, Section 617.0503, Fk	orida Statute	y arie corporati S.	ion's board or directors. Friereby accep	of the appointment as registered
SIGNATURE						
12.	Signature, typed or printed name of registered at		E: Registered Age	ent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE SERS AND DIRECTORS IN 12
TITLE			1.1 TITLE	<del></del>	ADDITIONS OF ACCUSE TO CITY	Change Addition
NAME			1.2 NAME			
STREET ADDRESS	A D D D A A A A A A A A A A A A A A A A		1.3 STREET	ADDRESS		
CITY-ST-ZIP	WINTER HAVEN, FL 00000		1.4 CITY-5	ST-ZIP		
TITLE			2.1 TITLE			Change Addition
NAME	PARKER, LOWELL 222		2.2 NAME			
STREET ADDRESS			2.3 STREET	ADDRESS		
CITY-S1-ZIP	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		2.4 CITY-	ST-ZIP	<del></del>	
TITLE			3.1 TITLE	ŀ		☐ Change ☐ Addition
NAME	TYE, DON		3.2 NAME			i
STREET ADDRESS	LAND PROPERTY LAND PA		3.3 STREET	1		
CITY-ST-ZIP TITLE			3.4. CITY-	51-211		Change Addition
NAME	BASSHAM, GENE	- Detrit	4.1 INCE			El sumillo
STREET ADDRESS	1647 MARKER RD.		4.3 STREET			
CITY-ST-ZIP			4.4 CITY - S			
TITLE	D	DELETE	5.1 TITLE	T	A DA LIVIL	Change Levoltion
NAME	WILLIAMS, BOBBY		5.2 NAME		Jett Wilson,	A #
STREET ADDRESS	805 INDIAN BLUFF RD			ADDRESS	307 Cambridge Squ	we ex

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 am an officer or directoryof the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed for on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE

CITY-ST-ZIP TITLE

STREET ADDRESS

NAME

WINTER HAVEN FL

1232 TANGERINE PARKWAY, NE

**BUSH, GARY** 

D

NAME OF SIGNING OFFICER OR DIRECTOR

4/25/97 941-294-3561

**FILED** 

May 08 1997 8:00am

Secretary of State