2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 01, 2001 8:00 am Secretary of State **DOCUMENT # 769885** 1. Entity Name CYPRESS CREEK OFFICE & INDUSTRIAL PARK PROPERTY 02-01-2001 90161 002 ****61.25 Principal Place of Business Mailing Address 825 NW 61ST STREET 825 NW 61ST STREET FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Applied For City & State 4. FEI Number 59-2340203 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SUPPE, JAMES 825 N.W. 61ST ST. FT. LAUDERDALE FL 33309 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition STD Change ☐ Delete TITLE TITLE BERRY ANDREW 610 POWERLINE ROAD SUPPE, ANN NAME NAME STREET ADDRESS STREET ADDRESS 825 NW 61 ST CITY-ST-ZIP FT. LAUDERDALE, FL CITY-ST-ZIP FT. LAUDERDALE FL Change ☐ Addition PD ☐ Delete TITLE TITLE SUPPE, JAMES 825 NW 61 ST. SUPPE, JAMES NAME NAME STREET ADDRESS STREET ADDRESS 825 NW 61ST ST. CITY-ST-ZIP LAUDERDALE, FL 33309 CITY-ST-ZIP FT. LAUDERDALE FL ☐ Change ☐ Addition D ☐ Delete TITLE TITLE MINIEA, SAM NAME NAME STREET ADDRESS STREET ADDRESS 850 NW 61ST ST. CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL Addition Change ☐ Delete TITLE TITLE MYERS, KIMBERLY NAME STREET ADDRESS STREET ADDRESS 877 NW 61 ST CITY-ST-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33309 ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITI F

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

☐ Delete

☐ Change

Addition