

## FLORIDA DEPARTMENT OF STATE Secretary of State

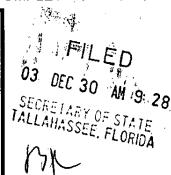
DIVISION OF CORPORATIONS

## DOCUMENT # A97000000543

1. Name of Limited Partnership

CYT PROPERTIES, LTD.





2. Principal Office 445 SW-2	Address 7th Avenue	<b>3.</b> Mailing Office A 445 SW - 2	ddress 27th Avenue	4. Date Formed or Registered To Business in Florida 03/0		
Suite, Apt. #, etc. Suite F-106		Suite, Apt. #, etc. Suite F-106		5. FEI Number 65-0748739	Applied For Not Applicable	
city & State Vero Beach, Florida		City & State Vero Beach, Florida		CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status		
Zip 32968	Country	z <sub>ip</sub> 32968	Country	7a. Capital Contributions as shown on Re	950,000.00	
8. Name and Address of Current Registered Agent				<b>7b.</b> Amount of Capital Contributions in <b>FLORIDA</b> to date: \$330,000.00		
Name Byron T. Cooksey  Street Address (P.O. Box Number is Not Acceptable) 979 Beachland Blvd.				in 7b, with a minimum filing fee of \$52,50 for <u>each year due</u> this office.	1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.  2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.  3.) Penalty Fee(s): \$500 penalty fee for each year report form is definquent.	
Suite, Apt. #, Etc. n/a			with 1992 calendar year.  3.) Penalty Fee(s): \$500 penalty fee for each			
<sup>City</sup> Vero Beach		St F	ate Zip Code 32963	Note: If the amount entered in 7b is grea 7a, a supplemental affidavit must be sub and appropriate filing fee.		

Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered 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 its general partner(s). I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)  $\frac{n/a}{}$ 

n/a

## A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 10a. Registration City, State and Zip Code Name(s) of General Partner(s)

445 SW - 27th Avenue, CYT, Management, Inc.

Vero Beach, FL 32968

P 97000010958

REMSTATEMENT 2003

Suite F-106

0000261**6**9280 /06/04--01047+023 \*\*\*\$

000026169280 01/06/04--01047--022 \*\*1035.00

## Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

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. Further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620. Florida Statutes.

SIGNATURE BY:

as President

Byron T. Cooksey, II,
Typed or Printed Name of General Partner Signing Form

(772) 770-0889