2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F19034

1. Entity Name CYPRESS REALTY OF TALLAHASSEE, INC.



FILED Apr 12, 2004 08:00 AM Secretary of State

Principal Place of Business

2921 PARRAMORE SHORES RD TALLAHASSEE, FL 32310 US Mailing Address

2921 PARRAMORE SHORES RD TALLAHASSEE, FL 32310 US



DO NOT WRITE IN THIS SPACE

03302004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For S9-2066324 Not Applied For Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RODBY, DEBORAH A. 2921 PARRAMORE SHORES RD TALLAHASSEE, FL. 32310

DO NOT WRITE IN THIS SPACE

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The above named entity submits the obligations of registered age.		of changing its registere	ed office or re	gistered agent, or bol	th, in the State of Florid	ia. I am familiar	with, and accept
SIGNATURE Signature, typed of printed name of registered agent and title of applicable (NOTE Registered Agent signature required when renstating)						3 31 G	
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.				\$5.00 May Be Added to Fees	<u> </u>		\
10.	OFFICERS AND DIRECTORS					·····	
THE PTS NAME RODBY, DEBOR. STREET ADDRESS 2921 PARRAMOI CITY-ST-ZP TALLAHASSEE,	RE SHORES RD				UC00001 94/12/04-8	10775 0096-025	150.00
TITLE D NAME RODBY, DEBOR. STREET ADDRESS 2921 PARRAMOI CITY-ST-ZIP TALLAHASSEE,	RE SHORES RD						
TITLE NAME STREET ADDRESS CITY ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPA	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADORESS CITY ST-ZIP							
12. I hereby certify that the informal indicated on this report or support of the corporation or the received changed, or on an attachment	ation supplied with this filing doe plemental report is true and acc yer or trustee empowered to exe with an address, with all other in	es not qualify for the execurate and that my signal cute this report as requirempowered.		d in Section 119.07(3) te the same legal effe ter 607, Florida Statuti rah A R ud			t the information officer or director to 10 or Block 11 if
SIGNATURE:	TURE AND TYPED OR PRINTED NAME OF	SIGNING OFFICER OR WIRECT			7 3 31 G	Daytime P	228