

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000006400

1. Entity Name

CYPRESS CREEK INVESTORS, INC.

5375

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90051 028 ***150.00

Principal Place of Business
FOUR EMBARCADERO CENTER, SUITE 2200
SAN FRANCISCO CA 94111

Mailing Address
FOUR EMBARCADERO CENTER, SUITE 2200
SAN FRANCISCO CA 94111-5998

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 94-3288901

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME CREWS, JESSE V
STREET ADDRESS 15 ALICE PLACE
CITY-ST-ZIP ORINDA CA 94536 ☐ Delete

TITLE
NAME JESSE V. CREWS ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME MIHM, EDWIN R
STREET ADDRESS FOUR EMBARCADERO CENTER, SUITE 2200
CITY-ST-ZIP SAN FRANCISCO CA 94111 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SC
NAME NORD, THOMAS C
STREET ADDRESS FOUR EMBARCADERO CENTER, SUITE 2200
CITY-ST-ZIP SAN FRANCISCO CA 94111 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME TINNON, RICHARD M
STREET ADDRESS FOUR EMBARCADERO CENTER, SUITE 2200
CITY-ST-ZIP SAN FRANCISCO CA 94111 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME WHITE, JAMES G
STREET ADDRESS FOUR EMBARCADERO CENTER, SUITE 2200
CITY-ST-ZIP SAN FRANCISCO CA 94111 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V
NAME JENKINS-STARK, JOHN
STREET ADDRESS 613 MURRAY PLACE
CITY-ST-ZIP LAFAYETTE CA 94549 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

THOMAS C. NORD

Date

2-16-00

Daytime Phone #

415 955 3340

CR2E034 (9/99)