FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 20 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K72662** **(5)**

1. Corporation Name

~~CYPRESS REAL ESTATE SERVICES, INC.~~

CSC CYPRESS REAL ESTATE SERVICES, INC.

Principal Place of Business	Mailing Address
~~614 BANYAN TRL~~ ~~BOCA RATON FL 33431~~	~~614 BANYAN TRL~~ ~~BOCA RATON FL 33431~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/10/1989
3a. Date of Last Report: 02/02/1994

2. Principal Place of Business	2a. Mailing Address
21 4901 NW 17th Way	26 4901 NW 17th Way
Suite, Apt. #, etc. 22 Suite 103	Suite, Apt. #, etc. 27 Suite 103
City & State 23 Ft. Lauderdale, FL	City & State 28 Ft. Lauderdale, FL
Zip / Country 24 33309 / 25 Broward	Zip / Country 29 33309 / 30 Broward

4. FEI Number: 65-0111599 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ROSS, MICHAEL GREENSPOON, MARDER, HIRSCHFELD & RAFKIN 100 W CYPRESS CREEK RD, STE 700 FT LAUDERDALE FL 33309	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	☐ Change ☐ Addition
NAME	COLLINS, JOHN P.	12 NAME	
STREET ADDRESS	3950 N.W. 53 STREET	13 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	14 CITY-ST-ZIP	
TITLE	VP	21 TITLE	☐ Change ☐ Addition
NAME	LLOYD, W SCOT	22 NAME	
STREET ADDRESS	931 PALM TRAIL, #5	23 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL	24 CITY-ST-ZIP	
TITLE	T	31 TITLE	☐ Change ☐ Addition
NAME	CORZETTE, STEPHEN S	32 NAME	
STREET ADDRESS	3721 NE 29 AVE	33 STREET ADDRESS	
CITY-ST-ZIP	LIGHTHOUSE PT FL	34 CITY-ST-ZIP	
TITLE	S	41 TITLE	☐ Change ☐ Addition
NAME	SCHRAGE, JOSEPH B	42 NAME	
STREET ADDRESS	7510 SW 105 TERR	43 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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14. 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)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John P. Collins — 1/12/95 — 305/351-9993
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

LW 4-20-95

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