

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jul 06, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90118 010 \*\*\*\*50.00

<b>DOCUMENT # L00000007555</b>					
<b>1. Entity Name</b> CYPRESS BREEZE, L.L.C.					
<b>Principal Place of Business</b> 40001 EMERALD COAST PARKWAY DESTIN, FL 32541			<b>Mailing Address</b> 40001 EMERALD COAST PARKWAY DESTIN, FL 32541		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 59-3662934	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>				<b>Applied For</b> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b>  WARD, LORI ELLEN ESQ MATTHEWS & HAWKINS PA 687 HAWKINS DESTIN, FL 32541			<b>7. Name and Address of New Registered Agent</b> Name: <u>WARD, LORI ELLEN ESQ</u> Street Address (P.O. Box Number is Not Acceptable): <u>MATTHEWS &amp; HAWKINS</u> <u>4475 Legendary Dr. Box 40</u> City: <u>DESTIN</u> FL <u>32541</u>		
<b>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. I am familiar with, and accept the obligations of registered agent.</b>					
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reinstating)					
<b>Filing Fee is \$50.00</b> <b>Due by May 1, 2004</b>		Make check payable to Florida Department of State			
<b>9. MANAGING MEMBERS / MANAGERS</b>			<b>10. ADDITIONS / CHANGES</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	MGRM CONCOURSE, INC. 276 MARWOOD DRIVE BIRMINGHAM, AL 35244 <input checked="" type="checkbox"/> <b>Delete</b>		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	member Concourse Inc 276 Marwood Drive Birmingham AL 35244 <input checked="" type="checkbox"/> <b>Addition</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	MGRM SEACREST INVESTMENT OF NORTHWEST 40001 EMERALD COAST PARKWAY DESTIN, FL 32541 <input checked="" type="checkbox"/> <b>Delete</b>		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	MGRM Seacrest Ventures Inc 40001 Emerald Coast Pkwy Destin FL 32541 <input checked="" type="checkbox"/> <b>Addition</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> <b>Delete</b>		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> <b>Change</b> <input type="checkbox"/> <b>Addition</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> <b>Delete</b>		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> <b>Change</b> <input type="checkbox"/> <b>Addition</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> <b>Delete</b>		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> <b>Change</b> <input type="checkbox"/> <b>Addition</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> <b>Delete</b>		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> <b>Change</b> <input type="checkbox"/> <b>Addition</b>	
<b>11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.</b>					
<b>SIGNATURE:</b> <u>W. C. Adams</u>			President MGRM <u>43004 8506547211</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

Attachment

34009117

# L00000007555

40001 Emerald Coast Pkwy.  
Destin, Florida 32541  
Tel: 850.654.7211  
Fx: 850.654.7215

## CYPRESS BREEZE L.L.C.

June 30, 2004

Florida Department of State  
P.O. Box 6478  
Tallahassee, Florida 32314

Dear Mrs Hood,

I am resending this information regarding Cypress Breeze LLC as I have just received a card saying that this company will be dissolved if I do not get this letter to you. I have previously mailed this in but apparently the State has not received it.

I have checked the box to delete Concourse, Inc off of the UBR. If you should have any further questions please contact me at 850-654-7211,

Sincerely,

  
Ginger McDowell  
Assistant