

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 09, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000019668

1. Entity Name
CYPRESS DEVELOPMENT GROUP, LLC



Principal Place of Business
% STILES CORP-ATTN: PATRICIA JONES
300 S.E. 2ND ST.
FT LAUDERDALE, FL 33301

Mailing Address
% STILES CORP-ATTN: PATRICIA JONES
300 S.E. 2ND ST.
FT LAUDERDALE, FL 33301



01042005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
16-1671115

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOUK, JANE A ESQ
200 S. BISCAYNE BLVD., STE. 4900
MIAMI, FL 33131

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

000000256971
03/09/05-80033-017 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
TIDWELL, JAMES
4313 NE 22ND AVE
FORT LAUDERDALE, FL 33308

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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CITY- ST- ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #