## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000051985

1. Entity Name Z CYPRESS DRIVE ASSOCIATES, LLC



FILED
Jan 12, 2006 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

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

7985 SE COUNTRY ESTATES WAY JUPITER, FL 33458

7985 SE COUNTRY ESTATES WAY JUPITER, FL 33458



DO NOT WRITE IN THIS SPACE

01062006 No Chg-LLC CR2E083 (11/05)

4. FEI Number Applied For Not Applied For Not Applied For

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent
LEROSE, FRANK A

7985 SE COUNTRY ESTATES WAY JUPITER, FL 33458

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or boi	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or privide name of registered opera and title if applicable.	(NOTE: Registered Agent signature required when reinstalling)	DATE
Fi	iling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LEROSE, FRANK A 7985 SE COUNTRY ESTATES WAY JUPITER, FL 33458		·
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000385110 01/18/06-80003-015 <b>50.</b> 00
NTLE NAME STREET ADDRESS CITY-ST-ZIP		DO	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	
TITLE NAME STREET AGGRESS CITY-ST-ZIP		_	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			- <del>-</del>
11. I hereby indicated limited li	certify that the information supplied with this filing does no d on this report is true and accurate and that my signature ability company or the receiver or trustee empowered to ex	t qualify for the exemptions contained in Chapter 1 shall have the same legal effect as if made under ecute this report as required by Chapter 608, Flori	<ol> <li>Florida Statutes. I further certify that the information oath; that I am a managing member or manager of the da Statutes.</li> </ol>