

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000051985

1. Entity Name
CYPRESS DRIVE ASSOCIATES, LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 JAN 12 AM 9:18

Principal Place of Business
7985 SE COUNTRY ESTATES WAY
JUPITER, FL 33458

Mailing Address
7985 SE COUNTRY ESTATES WAY
JUPITER, FL 33458



DO NOT WRITE IN THIS SPACE

01052007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 00-1228727	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LEROSE, FRANK A
7985 SE COUNTRY ESTATES WAY
JUPITER, FL 33458

**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 remitting)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

0000085646270
01/23/07-01006--004 **\$50.00

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME LEROSE, FRANK A
STREET ADDRESS 7985 SE COUNTRY ESTATES WAY
CITY-ST-ZIP JUPITER, FL 33458

TITLE
NAME
STREET ADDRESS
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 exemptions contained in Chapter 119, 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: *Frank Lerosse*

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

561 7466442

Date Daytime Phone #