

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000006122

FILED  
Apr 10, 2007  
Secretary of State

**Entity Name:** CYPRESS ABSOLUTE RETURN INVESTORS, L.L.C.

**Current Principal Place of Business:**

218 ROYAL PALM WAY  
SUITE 100  
PALM BEACH, FL 33480

**New Principal Place of Business:**

218 ROYAL PALM WAY  
PALM BEACH, FL 33480

**Current Mailing Address:**

218 ROYAL PALM WAY  
SUITE 100  
PALM BEACH, FL 33480

**New Mailing Address:**

218 ROYAL PALM WAY  
PALM BEACH, FL 33480

**FEI Number:** 13-4273623

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JONES FOSTER SERVICE, LLC  
505 SOUTH FLAGLER DRIVE  
SUITE 1100  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: O'BRIEN, RAYMOND  
Address: 218 ROYAL PALM WAY, SUITE 100  
City-St-Zip: PALM BEACH, FL 33480

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: O'BRIEN, RAYMOND  
Address: 218 ROYAL PALM WAY  
City-St-Zip: PALM BEACH, FL 33480

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RAYMOND C. O'BRIEN

MGRM

04/10/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date