## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000043186

Entity Name: CYPRESS LAKES LLC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

856 WESTLAKE DRIVE 27 WELLINGTON DRIVE

ORMOND BEACH, FL 32174 US BASKING RIDGE, NJ 07920 US

Current Mailing Address: New Mailing Address:

856 WESTLAKE DRIVE 27 WELLINGTON DRIVE

ORMOND BEACH, FL 32174 US BASKING RIDGE, NJ 07920 US

FEI Number: 71-1022019 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

DMYTRYK, JACK SHELLEY, DENIS

856 WESTLAKE DR 313 SOUTH PALMETTO AVENUE ORMOND BEACH, FL 32174 US DAYTONA BEACH, FL 32114 US

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: DENIS SHELLEY 04/29/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 DMYTRYK, JACK
 Name:
 WORKMAN, BRIAN

 Address:
 856 WESTLAKE DR
 Address:
 27 WELLINGTON DRIVE

 City-St-Zip:
 ORMOND BEACH, FL 32174 US
 City-St-Zip:
 BASKING RIDGE, NJ 07920 US

Title: S () Delete Title: () Change () Addition

 Name:
 SLADDEN, MICHAEL
 Name:

 Address:
 500 WEST END AVE
 Address:

 City-St-Zip:
 NEW YORK, NY 10024 US
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

 Name:
 WORKMAN, BRIAN
 Name:
 DMYTRYK, MICHELE

 Address:
 27 WELLINGTON DR
 Address:
 856 WESTLAKE DR

City-St-Zip: BASKING RIDGE, NJ 07920 US City-St-Zip: ORMOND BEACH, FL 32174 US

I hereby certify that the information supplied with this filing does not qualify 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: BRIAN R. WORKMAN MGR 04/29/2009