

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90344 044 ****50.00

DOCUMENT # L98000003238

1. Entity Name

CYPRESS SPRINGS VILLAGE S, LLC

Principal Place of Business

11 CHURCH STREET, SUITE 200
TORONTO ONTARIO CANADA M5E -1W1
OC

Mailing Address

11 CHURCH STREET, SUITE 200
TORONTO ONTARIO CANADA M5E -1W1
OC

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **98-0199035**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, RALPH SR.
14237 LAKE UNDERHILL ROAD
ORLANDO FL 32828

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Department of State
Due By September 25, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
CYPRESS SPRINGS VILLAGE S CORP.
11 CHURCH STREET, SUITE 200
TORONTO ONTARIO CANADA M5E -1W1 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

Russell Jacobson

July 15 2002

(416) 861-5753

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

Date

Daytime Phone #

CR2E083 (4/02)



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 8, 2002

CYPRESS SPRINGS VILLAGE S, LLC
11 CHURCH STREET, SUITE 200
TORONTO ONTARIO CANADA, M5E-1W1

SUBJECT: CYPRESS SPRINGS VILLAGE S, LLC
Ref. Number: L98000003238

We have received your document for CYPRESS SPRINGS VILLAGE S, LLC and check(s) totaling \$550.00. However, your check(s) and document are being returned for the following:

The fee to file the limited liability company annual report/uniform business report form is \$50. Please include an additional \$5 for each certificate of status requested.

You must complete the attached UBR for this Limited Liability Company, the UBR submitted is for a Corporation.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 202A00042434