

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # M04000003724

1. Entity Name
CYPRESS FLORIDA, LLC



Principal Place of Business
6111 PEACHTREE DUNWOODY RD., NE, STE. B-102
ATLANTA, GA 30328

Mailing Address
6111 PEACHTREE DUNWOODY RD., NE, STE. B-102
ATLANTA, GA 30328



04262007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1499885

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 2301-2525

**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 reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BULLINGTON, STANLEY R
STREET ADDRESS	6111 PEACHTREE DUNWOODY RD., NE, STE. B-102
CITY-ST-ZIP	ATLANTA, GA 30328
TITLE	MGR
NAME	COLLINS, WILLIAM R JR
STREET ADDRESS	6111 PEACHTREE DUNWOODY RD., NE, STE. B-102
CITY-ST-ZIP	ATLANTA, GA 30328
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000745593
05/16/07-80035-011 50.00

**DO NOT WRITE
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:

Stanley R Bullington

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

Date

4/26/07

Daytime Phone #

770-391-1993