

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Apr 29, 2004 08:00 AM
Secretary of State**

DOCUMENT # M96000000313

1. Entity Name
CYPRESS REAL ESTATE COMPANY II, L.L.C.



Principal Place of Business
SUNTRUST BANK
201 S. COURT STREET, SUITE 610
FLORENCE, AL 35630

Mailing Address
P.O. BOX 1426
FLORENCE, AL 35631



04202004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
63-1178753

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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, 2004**

U00000140340
04/29/04-80157-023 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	ABROMS, MARTIN R
STREET ADDRESS	201 S. COURT STREET, SUITE 610
CITY-ST-ZIP	FLORENCE, AL 35630

TITLE	
NAME	
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IN THIS SPACE**

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

4/20/04

Date

256-767-0740

Daytime Phone #