2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006162

FILED Apr 29, 2004 Secretary of State

Entity Name: CYPRESS GARDENS OF FORT MYERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
AN STRAUB, E STREET NY 12207	P.C.			
lailing Addres	ss:	New Mailing Addre	ess:	
AN STRAUB, E STREET NY 12207	P.C.			
: 65-1090832	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
TRUXTON, BOLANOS P.A. 12800 UNIVERSITY DRIVE SUITE 340 FORT MYERS, FL 33907		12800 UNIVERSITY SUITE 350	TRUXTON, BOLANOS P.A. 12800 UNIVERSITY DRIVE SUITE 350 FORT MYERS, FL 33907	
e named entity e of Florida.	submits this statement for the	purpose of changing its register	red office or registered agent, or both,	
SIGNATURE:			04/29/2004	
Electronic Signature of Registered Agent		ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
RILEY, PATRIC 121 STATE ST	CK J REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
ALDRICH, JOH 121 STATE ST	N .	Title: Name: Address: City-St-Zip:	() Change () Addition	
,		Title: Name: Address:	() Change () Addition	
	AN STRAUB, E STREET NY 12207 Iailing Address AN STRAUB, E STREET NY 12207 : 65-1090832 I Address of (I) BOLANOS INTERSITY DRIPORT OF STREET OF SAND DIRECT OF SAND DIREC	AN STRAUB, P.C. E STREET NY 12207 lailing Address: AN STRAUB, P.C. E STREET NY 12207 : 65-1090832	AN STRAUB, P.C. E STREET NY 12207 Iailing Address: AN STRAUB, P.C. E STREET NY 12207 BY 12207	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN ALDRICH D 04/29/2004