2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003341

Entity Name: CYPRESS EQUITY FUND MANAGEMENT CORP.

Apr 23, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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390 N ORANGE AVE

STE 1300

390 N ORANGE AVE

ORLANDO, FL 32801

STE 1300

ORLANDO, FL 32801 US **Current Mailing Address:**

ORLANDO, FL 32803 New Mailing Address:

800 N MAGNOLIA AVENUE

800 N MAGNOLIA AVENUE

SUITE 1100

SUITE 1100

ORLANDO, FL 32803 US

FEI Number: 59-3260874 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

US

Name and Address of New Registered Agent:

US

HAUG, HOWARD 390 N ORANGE AVE

SUITE 1300

ORLANDO, FL 32801 US

MURPHY, PAMELA 800 N MAGNOLIA AVENUE SUITE 1100

ORLANDO, FL 32803 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: PAMELA MURPHY

04/23/2007 Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete HEGGESTAD, ARNOLD A Name:

OFFICERS AND DIRECTORS:

321 SHIZIN HALL, UNIV OF FL Address:

City-St-Zip: GAINESVILLE, FL 32611

Title: () Delete ARONSON, DAN Name:

Address: 515 E LAS OLAS BLVD, STE 1500

City-St-Zip: FT LAUDERDALE, FL 33301

Title: () Delete LAUBSCHER, LOUIS Name:

390 N. ORANGE AVENUE -SUITE 1300 Address:

City-St-Zip: ORLANDO, FL 32801

Title: (X) Delete

Name: HAUG, HOWARD 390 N. ORANGE AVENUE -SUITE 1300 Address:

City-St-Zip: ORLANDO, FL 32801

Title: (X) Delete MURPHY, PAMELA

Name: 390 N. ORANGE AVENUE -SUITE 1300 Address:

City-St-Zip: ORLANDO, FL 32801 (X) Change () Addition

HAUG, HOWARD Name:

Address: 800 N MAGNOLIA AVENUE, SUITE 1100

City-St-Zip: ORLANDO, FL 32803

Title: (X) Change () Addition

LAUBSCHER, LOUIS Name:

Address: 800 N MAGNOLIA AVENUE, SUITE 1100

City-St-Zip: ORLANDO, FL 32803

Title: (X) Change () Addition

Name: MURPHY, PAMELA

800 N MAGNOLIA AVENUE, SUITE 1100 Address:

City-St-Zip: ORLANDO, FL 32803

Title: () Change () Addition

Name: Address: City-St-Zip:

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: PAMELA MURPHY D 04/23/2007