

FILE NOW: FILING FEE IS \$61.25

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May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N94000004926 (1) 1. Corporation Name CYPRESS PLACE, INC.					
Principal Place of Business 10,000 STIRLING RD. SUITE 2 COOPER CITY FL 33024			Mailing Address 10,000 STIRLING RD. SUITE 2 COOPER CITY FL 33024		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 01/12/1994 4. FEI Number 65-0480744 Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No					
9. Name and Address of Current Registered Agent GINSBERG, YVONNE 3121 N. 52 AVENUE HOLLYWOOD FL 33024			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP			1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
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CR2E037 (10/97)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

YVONNE GINSBERG EXECUTIVE 4-15-98

Date

Daytime Phone # 0023633