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Jun 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
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DOCUMENT # **N97000006233 (7)**

1. Corporation Name

CYPRESS SKATING CLUB, INC.

Principal Place of Business

Mailing Address

**200 POST AVE.
WINTER HAVEN FL 33880**

**200 POST AVE.
WINTER HAVEN FL 33880**

3. Date Incorporated or Qualified

11/03/1997

4. FEI Number

59-3478859

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21
Suite, Apt. #, etc.

26
Suite, Apt. #, etc.

22
City & State

27
City & State

23
Zip

Country

28
Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BENNETT, BARRY W
60 2ND ST. S.E.
WINTER HAVEN FL 33880**

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

TITLE	Ruth Marguis, Treasurer	<input type="checkbox"/> DELETE
NAME	552 Sutton Road	
STREET ADDRESS	Auburndale, FL 33823	
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Treasurer, D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Ruth Marguis	
1.3 STREET ADDRESS	552 Sutton Road	
1.4 CITY-ST-ZIP	Auburndale FL 33823	

2.1 TITLE	President, D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	David White	
2.3 STREET ADDRESS	1280 Buckeye Rd	
2.4 CITY-ST-ZIP	Winter Haven, FL 33881	

3.1 TITLE	Secretary, D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Lynn Bischoff	
3.3 STREET ADDRESS	1280 Buckeye Road	
3.4 CITY-ST-ZIP	Winter Haven, FL 33881	

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Ruth Marguis *1-200-98 941-200-2929*

CR2E037 (10/97)