2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000004963

Entity Name: CYPRESS ENTERPRISES OF PASCO, INC.

FILED Jun 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

36189 EAST LAKE RD 4516 COUNTRY BREEZE DR PALM HARBOR, FL 34685 NEW PORT RICHEY, FL 34653

Current Mailing Address: New Mailing Address:

PO BOX 1810 4516 COUNTRY BREEZE DR ELFERS, FL 346801810 NEW PORT RICHEY, FL 34653

FEI Number: 59-3621780 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

PHILLIPS, KATHLEEN L PHILLIPS, KATHLEEN L 4516 COÚNTRY BREEZE DR 5040 SOÚTHSHORE DR NEW PORT RICHEY, FL 34652 US US NEW PORT RICHEY, FL 34653

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: KATHLEEN L. PHILLIPS 06/30/2004

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

NEW PORT RICHEY, FL 34652 US

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

NEW PORT RICHEY, FL 34653 US

Title: () Delete Title: (X) Change () Addition PHILLIPS, KATHLEEN L PHILLIPS, KATHLEEN L Name: Name: 5040 SOUTHSHORE DR 4516 COUNTRY BREEZE DR Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34652 US City-St-Zip: NEW PORT RICHEY, FL 34653 US

Title: (X) Change () Addition Title: () Delete Name: JAMES. KEITH R PRESIDE Name: JAMES, KEITH R PRESIDE 4516 COUNTY BREEZE DR 4516 COUNTRY BREEZE DR Address: Address:

NEW PORT RICHEY, FL 34653 US NEW PORT RICHEY, FL 34653 US City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition SEC SEC PHILLIPS, RICHARD G SECRETA PHILLIPS, RICHARD G SECRETA Name: Name: 5040 SOUTHSHORE DR 4516 COUNTRY BREEZE DR Address: Address:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: KATHLEEN L. PHILLIPS CPT 06/30/2004