2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000087902

Entity Name: CYPRESS GARDENS OF FORT MYERS, INC.

FILED Mar 18, 2008 Secretary of State

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

C/O HINMAN STRAUB, P.C.

121 STATE STREET

ALBANY, NY 12207

C/O BOND, SCHOENECK & KING, PLLC

111 WASHINGTON AVE

ALBANY, NY 12210

Current Mailing Address: New Mailing Address:

C/O HINMAN STRAUB, P.C.

121 STATE STREET

ALBANY, NY 12207

C/O BOND, SCHOENECK & KING, PLLC

111 WASHINGTON AVE

ALBANY, NY 12210

FEI Number: 14-1835822 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOLANOS TRUXTON, P.A. 12800 UNIVERSITY DR. STE 350 FORT MYERS, FL 33907 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

in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: RILEY, PATRICK J Name: RILEY, PATRICK J Address: 121 STATE STREET Address: 111 WASHINGTON AVE

Address: 121 STATE STREET Address: 111 WASHINGTON AVI
City-St-Zip: ALBANY, NY 12207 City-St-Zip: ALBANY, NY 12210

Title: DVP () Delete Title: DVP (X) Change () Addition Name: RILEY, CHRISTINE C Name: RILEY, CHRISTINE C

 Name:
 RILEY, CHRISTINE C
 Name:
 RILEY, CHRISTINE C

 Address:
 121 STATE STREET
 Address:
 111 WASHINGTON AVE

 City-St-Zip:
 ALBANY, NY 12207
 City-St-Zip:
 ALBANY, NY 12210

Title: DS () Delete Title: DS (X) Change () Addition

 Name:
 ALDRICH, JOHN R
 Name:
 ALDRICH, JOHN R

 Address:
 121 STATE ST
 Address:
 111 WASHINGTON AVE

 City-St-Zip:
 ALBANY, NY 12207
 City-St-Zip:
 ALBANY, NY 12210

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN R. ALDRICH, ESQ. DS 03/18/2008