2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000117078

Entity Name: CYPRESS MEDICAL MANAGEMENT, INC.

FILED Feb 12, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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PO BOX 367

BABSON PARK, FL 33827

Current Mailing Address: New Mailing Address:

PO BOX 367 BABSON PARK, FL 33827

FEI Number: 59-3693379 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:

SWAINE, J. MICHAEL
425 S. COMMERCE AVE.
SEBRING, FL 33870

STRAUGHN, RICHARD
PO BOX 2295.
WINTER HAVEN, FL 33883

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: RICHARD STRAUGHN 02/12/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition Name: EHRLICH, MARY J Name:

 Name:
 EHRLICH, MARY J
 Name:

 Address:
 141 FAIRCHILD STREET
 Address:

 City-St-Zip:
 BABSON PARK, FL 33827
 City-St-Zip:

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.

SIGNATURE: MARY EHRLICH D 02/12/2004