

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91347 038 ***150.00

DOCUMENT # **P01000004603**

1. Entity Name

CYPRESS CAPITAL RESOURCE, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

315 58th STREET

Suite, Apt. #, etc.

UNIT C

City & State

HOLMES BEACH, FL

Zip

34217

Country

USA

3. Mailing Address

315 58th STREET

Suite, Apt. #, etc.

UNIT C

City & State

HOLMES BEACH, FL

Zip

34217

Country

USA

4. FEI Number

65-1064023

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

STEPHEN P. HOGAN

Street Address (P.O. Box Number is Not Acceptable)

315 58th STREET, UNIT C

City

HOLMES BEACH

FL

Zip Code

34217

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT STEPHEN P. HOGAN 315 58th STREET, C HOLMES BEACH, FL 34217	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

13. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephen P. Hogan

STEPHEN P. HOGAN

Date

5/6/02 (941) 778-9567

Daytime Phone #

CR2E034B (12/01)