


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P93000002237 1. Entity Name CYPRESS MEADOWS HOMES, INC.	
--	---

Principal Place of Business 6000 COMPTON ESTATES WAY TAMPA, FL 33647	Mailing Address 6000 COMPTON ESTATES WAY TAMPA, FL 33647
--	--



01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 22-3212562	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent INGLIS, JOHN S SHUMAKER, LOOP & KENDRICK, LLP 101 E KENNEDY BLVD #2800 TAMPA, FL 33602
--

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS KINSLER, WARREN 401 PROVIDENCE RD. BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV WILF, LEONARD 820 MORRIS TURNPIKE SHORT HILLS, NJ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WILF, ZYGMUNT 820 MORRIS TURNPIKE SHORT HILLS, NJ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT WILF, MARK 820 MORRIS TURNPIKE SHORT HILLS, NJ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000013077
01/26/04-80039-007 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attached sheet with an address, with all other like empowered

SIGNATURE: 	Warren Kinsler, Vice Pres.	1/23/04	813/910-7914
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #