

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0471767 AV

DOCUMENT # P93000002237

1. Entity Name
CYPRESS MEADOWS HOMES, INC.



FILED

03 JAN 28 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
6000 COMPTON ESTATES WAY
TAMPA FL 33647

Mailing Address
6000 COMPTON ESTATES WAY
TAMPA FL 33647

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 22-3212562

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INGLIS, JOHN S
SHUMAKER, LOOP & KENDRICK, LLP
101 E KENNEDY BLVD #2800
TAMPA FL 33602

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VS
NAME KINSLER, WARREN
STREET ADDRESS 401 PROVIDENCE RD.
CITY-ST-ZIP BRANDON FL 33511 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DV
NAME WILF, LEONARD
STREET ADDRESS 820 MORRIS TURNPIKE
CITY-ST-ZIP SHORT HILLS NJ ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DP
NAME WILF, ZYGMUNT
STREET ADDRESS 820 MORRIS TURNPIKE
CITY-ST-ZIP SHORT HILLS NJ ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE DVT
NAME WILF, MARK
STREET ADDRESS 820 MORRIS TURNPIKE
CITY-ST-ZIP SHORT HILLS NJ ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Warren Kinsler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Warren Kinsler, Vice President 01/08/2003 813/910-7914

Date

Daytime Phone #

CR2E034 (10/02)