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FILED
Mar 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000028407 (3)

1. Corporation Name

CYPRESS RUN APARTMENTS, INC.



Principal Place of Business

Mailing Address

30 ST CLAIR AVE W
SUITE 1100
TORONTO ON M4V 3-1
US

30 ST CLAIR AVE W
SUITE 1100
TORONTO ON M4V 3-1
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1993

4. FEI Number

98-0133430

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

23 Toronto, Ontario

27 City & State

28 Toronto, Ontario

24 Zip

24 M4V 3A1

25 Country

25 Canada

29 Zip

29 M4V 3A1

30 Country

30 Canada

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOOD, LATITIA E PA
200 E ROBINSON ST
STE 500
ORLANDO FL 32801

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME DV
MEDOFF, RONALD A
STREET ADDRESS 30 ST CLAIR AVE W SUITE 1100
CITY-ST-ZIP TORONTO, ONTARIO, CANADA

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME DP
HOFFER, MAYER
STREET ADDRESS 30 ST CLAIR AVE W SUITE 1100
CITY-ST-ZIP TORONTO, ONTARIO, CANADA

1.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

2.3 STREET ADDRESS ☐ Change ☐ Addition

2.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Ronald Medoff 51-2768 (416) 972-0450

CR2E034 (10/97)