



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90969 043 ***150.00

DOCUMENT # P94000033881 1. Entity Name SOUTH CYPRESS, INC.																																	
Principal Place of Business 2295 GENESEA LANE VERO BEACH, FL 32963				Mailing Address 2295 GENESEA LANE VERO BEACH, FL 32963																													
2. Principal Place of Business 1560 51st COURT Suite, Apt. #, etc.		3. Mailing Address 1560 51st COURT Suite, Apt. #, etc.																															
City & State VERO BEACH, FL		City & State VERO BEACH, FL		4. FEI Number 65-0489488																													
Zip 32966		Country I.R.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																													
6. Name and Address of Current Registered Agent BURDETTE, SUSAN C 2295 GENESEA LN VERO BEACH, FL 32963				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1560 51st COURT City VERO BEACH FL Zip Code 32966																													
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 <u><i>A. Burdette</i></u> DATE <u>4/25/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>																																	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> D BURDETTE, SUSAN C <input type="checkbox"/> Delete 13927 DOUBLETREE TRAIL WEST PALM BEACH, FL 33414 </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURDETTE, SUSAN C <input type="checkbox"/> Delete 13927 DOUBLETREE TRAIL WEST PALM BEACH, FL 33414													11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1560 51st COURT VERO BEACH, FL 32966 </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1560 51st COURT VERO BEACH, FL 32966												
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURDETTE, SUSAN C <input type="checkbox"/> Delete 13927 DOUBLETREE TRAIL WEST PALM BEACH, FL 33414																																
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1560 51st COURT VERO BEACH, FL 32966																																
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: <u><i>A. Burdette</i></u> <u>4/25/05</u> <u>772 321-6521</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																	