

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P95000091805 (8)

1. Corporation Name
CYPRESS COVE AT PELICAN BAY, INC.



Principal Place of Business 1 BAY GULL COURT DAYTONA BEACH FL 32119 US	Mailing Address 1 BAY GULL COURT DAYTONA BEACH FL 32119 US
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 CORMORANT CIRCLE Suite, Apt. #, etc. 22		2a. Mailing Address 26 P.O. Box 915302 Suite, Apt. #, etc. 27		3. Date Incorporated or Qualified 12/04/1995	
23 City & State DAYTONA BEACH FL Zip 32119 Country USA		28 City & State LONGWOOD FL Zip 32791 Country USA		4. FEI Number 59-3351578 Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent ANSBACHER, LEWIS 4215 SOUTHPOINT BLVD. SUITE 100 JACKSONVILLE FL 32216				10. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DVS	<input type="checkbox"/> DELETE		1.1 TITLE	DVS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHWARTZ, WINSTON			1.2 NAME	WINSTON SCHWARTZ		
STREET ADDRESS	1 BAY GULL COURT			1.3 STREET ADDRESS	1 CORMORANT CIRCLE		
CITY-ST-ZIP	DAYTONA BEACH FL			1.4 CITY-ST-ZIP	DAYTONA BEACH FL 32119		
TITLE	DPT	<input type="checkbox"/> DELETE		2.1 TITLE	DPT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ADLEY, JAMIE			2.2 NAME	JAMIE ADLEY		
STREET ADDRESS	1 BAY GULL COURT			2.3 STREET ADDRESS	1 CORMORANT CIRCLE		
CITY-ST-ZIP	DAYTONA BEACH FL			2.4 CITY-ST-ZIP	DAYTONA BEACH FL 32119		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 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: JAMIE ADLEY 1/12/98 (904) 760-2555

CR2E034 (10/97)