

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jun 22, 1999 8:00 am  
Secretary of State

06-22-1999 90003 005 \*\*\*150.00

DOCUMENT # P96000092698

1. Corporation Name

CYPRESS RIDGE INVESTMENTS, INC.

Principal Place of Business

6578 UNIVERSITY BLVD.  
WINTER PARK FL 32792

Mailing Address

6578 UNIVERSITY BLVD.  
WINTER PARK FL 32792

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/13/1996

4. FEI Number

59-3480108

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be

Added to Fees

8. This corporation owes the current year intangible

Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 7616 Southland Bv.

2a. Mailing Address

26 3575 W. LK. MARY BL

Suite, Apt. #, etc.

22 Suite 200

Suite, Apt. #, etc.

27 SUITE 107

City & State

23 Orlando, FL

City & State

28 LK. MARY, FL

Zip

24 32809 25

Country

Zip

29 32746 30

Country

9. Name and Address of Current Registered Agent

MILLER, WARREN  
6378 UNIVERSITY BLVD.  
WINTER PARK FL 32792

10. Name and Address of New Registered Agent

81

Name Warren Miller

82

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

83

3575 W. Lake Mary Blvd.

84

City Lake Mary

FL

85

Zip Code

32746

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

4/30/99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME GRAVES, ROCKY R  
STREET ADDRESS 6578 UNIVERSITY BLVD.  
CITY-ST-ZIP WINTER PARK FL 32792

TITLE D ☐ DELETE  
NAME MILLER, WARREN  
STREET ADDRESS 308 CRANE COVE  
CITY-ST-ZIP LONGWOOD FL 32750

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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, with all other like empowered.

SIGNATURE:

Signature Warren Miller

4/29/99

Date

407-324-0001

Daytime Phone #

CR2E034 (11/98)