## FILED Jan 09, 2002 8:00 am Secretary of State 01-09-2002 90013 046 \*\*\*150.00

Principal Plac	e of Busines	3	-	Mailing Address											
27615 US HWY 27 SUITE 107 LEESBURG FL 34748 US				27615 US HWY 27 SUITE 107 LEESBURG FL 34748 US											
2. Principal Place of Business				3. Mailing Address				1   100   100   110   151   100							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE							
City & State				City & State			<b>4</b> . F	4. FEI Number 59-3483667					Applied For Not Applicable		
Zip	Country			Zip Coun		ry 5. Certifi		Certificate of	tificate of Status Desired			\$8.75 Additional Fee Required			
6. Name and Address of Current F							7. N	lame and A	ddress of I	New Regi	stered A	gent		1	
OTFORES		antinetic Collection and	د ا ،	Name., .	بمستحدث يروه				٠.						
	edward f <del>Tatula-la</del>	NE 111	Wateru	pood Dr		Street Address (P.O. Box Number is Not Acceptable)							]		
CLERMONT FL 34717 Yalaha,				wood Dr FL 34797										1	
						City					FL	Zip Co	de	1	
8. The above	named entit	submits this st	atement for th	e purpose of changing its re	egistered	office or re	gistered age	ent, or both,	in the State	of Florid	а.			1	
SIGNATURE.	Signature, typed	or printed name of reg	istered agent and	title if applicable. (NOTE: 8	Registered A	gent signature r	required when re	instating)			DATE				
9: This corporation is eligible to satisfy its intangible Tax filling requirement and elects to do so. (See criteria on back)			so.	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of S			.00		on Campai Fund Conti		ing 🗆		00 May Be ed to Fees		
11.	OFFICERS AND (			RECTORS	12.		AD	DITIONS/CI	HANGES TO	OFFICE	RS AND	DIRECTO	RS IN 11	1_	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	10727 AS	EDWARD F TATULA LANE T-FL-34711	III n Yalah	□ Delete Daterwood Dr 19, FL 34797	NAME STREET CITY-ST	ADDRESS T-ZIP						Change	☐ Addition	CR2E034 (9/01)	
TITLE NAME STREET ADDRESS. CITY-ST-ZIP				☐ Delete	TITLE NAME STREET	ADDRESS F-ZIP	<u> </u>	<u>-</u>	<b></b>			☐ Change	Addition	75	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			_=	☐ Delete	TITLE NAME STREET	ADDRESS 1-ZIP		·~	g	^		Change	Addition	-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete	TITLE NAME STREET. CITY-ST	ADDRESS T-ZIP						☐ Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	* · · ·		☐ Delete	TITLE NAME STREET. CITY-ST	ADDRESS I-ZIP						Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	TITLE NAME STREET, CITY-ST	ADDRESS T-ZIP						☐ Change	Addition		
														1	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

1/4/03

352-728-1/80

SIGNATURE:

2002 UNIFORM BUSINESS REPORT (UBR) P97000101852

**DOCUMENT #** 

LONE CYPRESS ENTERPRISES, INC.

1. Entity Name

352 - 728 - 1180 Daytime Phone #