

# 2002 UNIFORM BUSINESS REPORT (UBR)

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

0566988  
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<b>DOCUMENT # P97000101852</b>			
1. Entity Name <b>LONE CYPRESS ENTERPRISES, INC.</b>			
Principal Place of Business <b>27615 US HWY 27 SUITE 107 LEESBURG FL 34748 US</b>		Mailing Address <b>27615 US HWY 27 SUITE 107 LEESBURG FL 34748 US</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>STEPHEN, EDWARD F</b> <b>10727 ASTATULA LANE</b> <b>CLERMONT FL 34711</b> <i>111 Waterwood Dr</i> <i>Yalaha, FL 34797</i>		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2002 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete	<b>D</b> <b>STEPHEN, EDWARD F</b> <b>10727 ASTATULA LANE</b> <b>CLERMONT FL 34711</b> <i>111 Waterwood Dr</i> <i>Yalaha, FL 34797</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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DO NOT WRITE IN THIS SPACE

CR2034 (9/01)

**SIGNATURE:**

*Edward F. Stephen*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*1/4/02*  
 Date

*352-728-1180*  
 Daytime Phone #