## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000045596

City-St-Zip:

FLORENCE, KY 45210

Entity Name: CYPRESS COMMERCIAL, INC.

FILED May 29, 2008 Secretary of State

| Current P                                     | rincipal Place                                      | e of Business:                   | New Principal Place o                       | New Principal Place of Business:             |  |
|---|---|----------------------------------|---|--|--|
| 1016 GRA<br>NAPLES, I                         | ND ISLE DRIV<br>FL 34108 \                          | Æ<br>JS                          |   |  |  |
| Current Mailing Address:                      |   |                                  | New Mailing Address                         | :  |  |
| 1016 GRA<br>NAPLES, I                         | ND ISLE DR<br>FL 34108 \                            | JS                               |   |  |  |
| FEI Number                                    | : 59-3515819  | FEI Number Applied For ( )       | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |   |                                  | Name and Address of New Registered Agent:   |  |  |
|   | RICHARD J<br>ND ISLE DRIN<br>FL 34108 U             | Æ<br>JS                          |   |  |  |
|   | e named entity<br>e of Florida.                     | submits this statement for the p | ourpose of changing its registered          | office or registered agent, or both,         |  |
| SIGNATUI                                      | RE:   |                                  |   |  |  |
|   | Electro   | nic Signature of Registered Age  | ent   | Date   |  |
| Election Ca                                   | mpaign Financin                                     | g Trust Fund Contribution ( ).   |   |  |  |
| OFFICERS AND DIRECTORS:                       |   |                                  | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | P (<br>ROLFES, RICH<br>1016 GRAND I<br>NAPLES, FL 3 | SLE DRIVE                        | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D (<br>ROLFES, RICH<br>1016 GRAND I<br>NAPLES, FL 3 | SLE DRIVE                        | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:                   | VD (<br>ROLFES, RICH<br>8150 HOLTON                 |                                  | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                      |  |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: RICHARD ROLFES P 05/29/2008