

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P98000104647**

1. Entity Name  
CYPRESS SPRINGS VILLAGE S CORP.



Principal Place of Business  
11 CHURCH STREET #200  
TORONTO, ONTARIO CANADA, M5E -1W1 CA

Mailing Address  
11 CHURCH STREET #200  
TORONTO, ONTARIO CANADA, M5E -1W1 CA

**DO NOT WRITE IN THIS SPACE**



04212004 No Chg-P CR2E034 (10/03)

4. FEI Number 98-0198965	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**6. Name and Address of Current Registered Agent**

SMITH, RALPPH  
6003 RIVERSIDE DRIVE  
YANKEETOWN, FL 34498

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV JACOBSON, RUSSELL 11 CHURCH STREET #200 TORONTO ONTARIO M5E 1W1,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS STEIN, MICHAEL 11 CHURCH STREET #200 TORONTO, ONTARIO, M5E 1W11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV POWERS, THOMAS E 11 CHURCH STREET #200 TORONTO, ONTARIO, M5E 1W1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BHARUCHA, YAZDI 11 CHURCH STREET #200 TORONTO, ONTARIO, M5E 1W1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/27/04-80107-016 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUSSELL JACOBSON

04/26/2004  
Date

(416) 861-5753  
Daytime Phone