2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF

NING OFFICER OR DIRECTOR

FILED **DOCUMENT # P99000107475** 1. Entity Name CYPRESS RIDGE GP. INC. 04 APR -5 PM 2: 36 Mailing Address SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business 800 N. HIGHLAND AVE., STE. 200 800 N. HIGHLAND AVE., STE. 200 ORLANDO, FL 32803 ORLANDO, FL 32803 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 02242004 Chg-P 4. FEI Number City & State City & State 59-3622977 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **B&C CORPORATE SERVICES OF CENTRAL FLORIDA** Street Address (P.O. Box Number is Not Acceptable) 390 NORTH ORANGE AVENUE **SUITE 1100** ORLANDO, FL 32801 Zip Code City 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change Addition KROPP, STEVEN G NAME NAME STREET ADDRESS STREET ADDRESS 800 N. HIGHLAND AVE., STE. 200 CITY-ST-ZIP ORLANDO, FL 32803 CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME CARLTON, CHARLES S NAME 300033220773 STREET ADDRESS 800 N. HIGHLAND AVE., STE, 200 STREET ADDRESS 04/21/04--01005--011 **150.00 CITY-ST-ZIP ORLANDO, FL 32803 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME WILLNER, DAVID M NAME STREET ADDRESS 800 N. HIGHLAND AVE., STE. 200 STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32803 CITY-ST-ZIP TITLE Delete TITLE Addition PEISNER, ERIC PRESSNER, ERIC NAME NAME STREET ADDRESS 800 N. HIGHLAND AVE., STE. 200 STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32803 CITY-ST-ZIP TITLE Delete ☐ Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP 12. 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 Statules; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other