JUL-25-2005 10:06 BECKER AND POLIAKOFF

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 29, 2005 8:00 am
Secretary of State
07-29-2005 90014 023 ****70.00

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07222005 Chg-NP CR2E037 (10/03)

DOCUMENT # 716898

1. Entity Name
ESSEX HOUSE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2180 WEST SR 434 STE 5000 LONGWOOD, FL 32779-5044	2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779-5044

2. Principal Place of Business	3. Mailing Address
707 S. GULFSTREAM AVE	707 S. GULFSTREAM AVE
Suite, Apt. #, etc. # 202	Suite, Apt. #, etc. # 202
City & State SARASOTA, FL	City & State SARASOTA, FL
Zip / Country 34236 / SARASOTA	Zip / Country 34236 / SARASOTA

4. FEI Number
59-1745545
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HART, JAMES JR
SENTRY MANAGEMENT INC
2180 W SR 434 STE 5000
LONGWOOD, FL 32779

7. Name and Address of New Registered Agent

Name: PERNA, RALPH
Street Address (P.O. Box Number is Not Acceptable)
707 S. GULFSTREAM AVE # 202
City: SARASOTA FL Zip Code: 34236

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: R.T. RALPH PERNA 7-26-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 7, 2005

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GAZALL, GARY 707 S GULFSTREAM AVE #202 SARASOTA, FL 34236	☒ Delete	PD SHARELL, GIL 707 S. GULFSTREAM AVE # 1008 SARASOTA, FL 34236	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SHARELL, GIL 707 S GULFSTREAM AVE #1008 SARASOTA, FL 34236	☐ Delete	VPD VARANO, LOTTIE 707 S. GULFSTREAM AVE # 1001 SARASOTA, FL 34236	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BAKER, MIKE 707 S GULFSTREAM AVE #107 SARASOTA, FL 34236	☐ Delete	SD BAKER, MIKE 707 S. GULFSTREAM AVE #107 SARASOTA, FL 34236	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ROSEN, HAROLD 707 S GULFSTREAM AVE #706 SARASOTA, FL 34236	☒ Delete	TD PERNA, RALPH 707 S. GULFSTREAM AVE # 202 SARASOTA, FL 34236	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLASEN, BOB 707 S GULFSTREAM AVE #408 SARASOTA, FL 34236	☒ Delete	D KOEHLINGER, DAVID 843 W. CASTLEWOOD CHICAGO, IL 60640	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KOEHLINGER, DAVID 843 W CASTLEWOOD CHICAGO, IL 60640	☐ Delete		☐ Change ☐ Addition

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 617, 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: Gilbert J. Sharell PD 7/26/05 941-650-4188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #