2005 NOT-FOR-PROFIT CORPORATION

May 03, 2005 8:00 am Secretary of State **ANNUAL REPORT** 05-03-2005 90104 049 ****61.25 **DOCUMENT #749482** PIEDMONT "E" ASSOCIATION, INC. 40079502 Mailing Address Principal Place of Business C/O PRIME MANAGEMENT GROUP, INC. C/O PRIME MANAGEMENT GROUP, INC. 6300 PRK OF COMMERCE BLVD 6300 PRK OF COMMERCE BLVD BOCA RATON, FL 33487 BOCA RATON, FL 33487 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02242005 Cha-NP CR2E037 (10/03) Applied For City & State 4. FEI Number 59-2039753 City & State Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SWATT, MYRON 6300 PK OF COMMERCE BLVD BOCA RATON, FL 33487 BoulevARG OF COMMERCE RATON 8. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. (NOTE Regis ent signature required when reinstating) Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE FINANDER, SID NAME NAME STREET ADDRESS 234 PIEDMONT E STREET ADDRESS DELRAY BEACH, FL 33484 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition KEMPLER, BOB NAME NAME STREET ADDRESS 206 PEIDMONT E STREET ADDRESS DELRAY BEACH, FL 33484 CITY-ST-7IP CITY-ST-7IP ☐ Delete TITLE □ Change ■ Addition TITLE SILVER, LORRAINE NAME NAME 229 PIEDMONT E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33484 CITY-ST-7IP Delete □ Change ■ Addition TITLE TITLE MILLER, JACK NAME NAME STREET ADDRESS 236 PIEDMONT E STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP DELRAY BEACH, FL 33484 □ Change ☐ Addition TITLE ☐ Delete TITLE DAVIS, SID NAME NAME 209 PIEDMONT E STREET ADDRESS STREET ADDRESS DELRAY BEACH, FL 33484 CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Defete TITLE TITI F HILLSBERG, BEN NAME NAME 200 PIEDMONT E STREET ADDRESS STREET ADDRESS DELRAY BEACH, FL 33484 CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filting 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:

FILED