2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

May 31, 2005 08:00 AM Secretary of State **DOCUMENT # 764141** 1. Entity Name DAVIS LAKE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 16007 DAVIS RD 16007 DAVIS RD FT MYERS FL 33908 FT MYERS FL 33908 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 59-2259278 Not Applicable Ζip Zip Country 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 Name NICHOLS, ROBERT Street Address (P.O. Box Number is Not Acceptable) 16007 DÁVIS ROAD, #413 FT. MYERS FL 33908 Zip Code FL 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 (NOTE Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 Make Check Payable to Election Campaign Financing \$5.00 May Be Trust Fund Contribution Due By May 1, 2005 Added to Fees Florida Department of State TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change ☐ Addition ☐ Del*e*te TITLE TOTLE NICHOLS, ROBERT L NAME MAME U000000368514 16007 DAVIS ROAD #413 STREET ADDRESS STREET ADDRESS *(*05/31/05-80004-009 61.25 FT MYERS FL 33908 CITY-ST-ZiP CITY-ST-7IP Change Addition ☐ Delete TITLE HILE ULSH, MARLIN K NAME 16007 DAVIS ROAD #221 STREET ADDRESS STREET ADDRESS FT. MYERS FL 33908 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TOTLE ☐ Change ☐ Addition BROWN, LEO NAME NAME 16007 DAVIS RD, 1024 STREET ADDRESS STREET ADDRESS CITY-ST-7tP FT. MYERS FL 33908 CITY-ST-ZIP Delete ☐ Addition ☐ Change THLE KNIPP, DON NAME 16007 DAVIS RD. #614 STREET ADDRESS STREET ADDRESS FORT MYERS FL 33908 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TriuE ☐ Change TITLE OBERG, ROBERT NAME NAME 16007 DAVIS ROAD #711 SURFEY ADDRESS STREET ADDRESS FORT MYERS FL 33908 CITY-ST-ZIP CiTY-ST-7JP ☐ Change Addition Delete 1th F TITLE NAME MAME STREET ADDRESS STREET ADDRESS CLTY-ST-ZIP CiTY-ST-7IP

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5/24/65 239-446-515/ Daytime Phone # SIGNATURE: 12

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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 eath, 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.