. 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # 766655 06-03-2005 90003 049 ****61.25 BANYAN TREE HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address C/O MIAMI MANAGEMENT INC. C/O MIAMI MANAGEMENT INC. 50053302 14275 SW 142 AVE 14275 SW 142 AVE MIAMI, FL 33186 MIAMI, FL 33186 %322211666666D& 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01102005 Cha-NP CR2E037 (10/03) City & State City & State 4. FEI Number Applied For 59-2390641 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TRIAY, CARLOS A 3750 NW 87 AVE. 10570 N.W. 27 STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 103 SUITE 100 MIAMI, FL. 33172 DOFAL, FL 33178 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to \Box Due by May 1, 2005 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Dohn, Patricia ☐ Delete TITLE Change NAME HUHRST, JEFFREY NAME 9850 Hammecks 9912 Hammocks Blud. #203 STREET ADDRESS 9800 HAMMOCKS BLVD #103 STREET ADDRESS Blud. # 103 CITY-ST-7IP MIAMI, FL 33196 CITY-ST-70 Miami, FC 33196 nne ☐ Detete TITLE ☐ Change ☐ Addition NAME HARPER, HAROLD NAME STREET ADDRESS 9874 HAMMOCKS BLVD #108 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33196 CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition JOHNSON, ANITA NAME STREET ADDRESS 9800 HAMMOCKS BLVD #102 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33196 CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME KRUGLIAK, ZVI NAME STREET ADDRESS 14421 S.W. 74 STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition SEGARRA, PEDRO NAME STREET ADDRESS 9802 HAMMOCKS BLVD #204 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33196 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NUME TYLER, PATRICK NAME STREET ADDRESS 9870 HAMMOCK BLVD #108 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33196 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 employeed 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 AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR SIGNATURE: HUMST

FILED

Jun 03, 2005 8:00 am