2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2005
Secretary of State

DOCUMENT# N03000006232

Entity Name: SONGBIRD SUBDIVISION PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

431 WAVERLY RD
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

431 WAVERLY RD
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 38-3643079 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ISAACS, DON L
431 WAVERLY RD
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: BOYNTON, BEN C
Address: 2735 MILLER LANDING ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: DVP ( ) Delete
Name: TURNER, DOUG
Address: 508-A CAPITAL CIRCLE SE
City-St-Zip: TALLAHASSEE, FL 32301

Title: DST ( ) Delete
Name: BOYNTON, ANNE R
Address: 2735 MILLER LANDING ROAD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition
Name: BOYNTON, BEN C
Address: 2735 MILLER LANDING ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: DP (X) Change ( ) Addition
Name: PRESTIA, JOEY
Address: 53 CARDINAL COURT
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: DST (X) Change ( ) Addition
Name: FERRELL, RALPH
Address: 2735 MILLER LANDING ROAD
City-St-Zip: CRAWFORDVILLE, FL 32327

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEN BOYNTON VP 04/24/2005

Electronic Signature of Signing Officer or Director — Date