2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05167

FILED Apr 25, 2005 Secretary of State

Entity Name: SUGAR MILL FIVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6015 MORROW ST E SUITE 107

JACKSONVILLE, FL 32217 US

Current Mailing Address: New Mailing Address:

6015 MORROW ST E SUITE 107

JACKSONVILLE, FL 32217 US

FEI Number: 59-2408765 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SULLIVAN, SCOTT

6015 MORROW STREET E.

SUITE 107

ACKSONVILLE EL 22217 LIS

BANNING MANAGEMENT, INC
6015 MORROW STREET E.
SUITE 107

LACKSONVILLE EL 22217 LIS

JACKSONVILLE, FL 32217 US JACKSONVILLE, FL 32217 US

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: BANNING MANAGEMENT INC 04/25/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Delete Title: PD (X) Change () Addition Name: GREEN, GERTRUDE Name: GREEN, GERTRUDE

 Name:
 GREEN, GERTRUDE
 Name:
 GREEN, GERTRUDE

 Address:
 3901 CROWN POINT RD #1223
 Address:
 3901 CROWN POINT RD #1223

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 JACKSONVILLE, FL 32257

Title: STD () Delete Title: () Change () Addition

 Name:
 BEAMON, JERRY
 Name:

 Address:
 3801 CROWN POINTS ROAD, #1332
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:

Title: PD () Delete Title: VPD (X) Change () Addition

Name: JACOBSON, MICHAEL Name: BEAMON, JERRY

 Address:
 3801 CROWN POINT RD #1273
 Address:
 3801 CROWN POINT RD #1332

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 JACKSONVILLE, FL 32257

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: GERTRUDE GREEN PD 04/25/2005