2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCUMENT # N45524

FILED
Mar 10, 2006 8:00 am
Secretary of State
03-10-2006 90020 029 ****61.25

NAME STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 TITLE NAME ADOLPH, STEVE STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 TITLE NAME ADOLPH, STEVE STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 TITLE VD OJEDA, LORI STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 TITLE NAME STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 TITLE STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 TITLE SD ACHESON, CHARLES STREET ADDRESS STREET ADR	1. Entity Nan PARKWO	ne DOD VIII .	ASSOCIATION, IN	NC.								
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. O1262006 Chg.NP CR2E037 (11/05) City & State City & State A FEI Number 65-0343412 Not Applicable Not Applicable State Status Desired State State State State State State Status Desired State Sta	1750 UNIVE	RSITY DR		1750	UNIVERSITY DR 7			4 10011164 844		4 81811 91841 9		
City & State Country Co	2. Principal I	Place of Busin	ness	3. Maili	ng Address	<u> </u>						
Zip Country Zip Country S. Certificate of Status Desired \$8.75 Academial \$8.75 A	Suite, Apt	. #, etc.		Suit	e, Apt. #, etc.			01262006	Chg-NP	CR2E	37 (11/05)	
S. Name and Address of Current Registered Agent 7. Name and Address of New Name Address of New Registered Agent 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the new registered agent, or both, in the State of Florida. I am familiar with, and accept the new registered agent, or both, in the State of Florida. I am familiar with, and accept the new registered agent, or both, in the State of Florida. I am familiar with, and accept the new registered agent, or both, in the State of Florida. I am familiar with, and accept the new registered agent, or both, in the State of Florida. I am familiar with, and accept the new registered agent, or both, in the State of Florida. I am familiar with, and accept the new registered agent, or both, in the State of Florida. I am familiar with, and accept the new registered agent, or both, in the State of Florida. I am familiar with, and accept the new registered agent, or both, in the State of Florida. I am familiar with, and accept the new registered agent, or both, in the State o	City & Sta	te		City	& State		-					· · · · · · · · · · · · · · · · · · ·
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SWEET MANAGEMENT SOLUTIONS 1750 UNIVERSITY OR #205 CORAL SPRINGS, FL 33071 City		6. Name	and Address of Current	t Registered	l Agent			7. Name and	Address of New R	Registered	Agent	
8. The above named entity submits this statement for the purpose of changing its registered citice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature	1750 UNI\	/ERSITY I	DR #205					P.O. Box Numbe	r is Not Acceptable	9)		
SIGNATURE Filing Fee Is \$61.25 Due by May 1, 2006 Due by May 1, 2006 Provided agent and table 8 applicable. (NOTE Registered Agent Expalative International) DATE											- '	
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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.

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SIGNATURE AND ON SIGNING OFFICER OR DIRECTOR

2-27-06