2006 NOT-FOR-PROFIT CORPORATION

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AMENDED ANNUAL REPORT 06 MAY -4 AM 11: 21: DOCUMENT # N96000006271 SECRETARY OF STATE THE COLONY AT PELICAN LANDING FOUNDATION, INC. TALLAHASSEE FLORIDA Principal Place of Business Mailing Address 24301 WALDEN CENTER DR 24301 WALDEN CENTER DR BONITA SPRINGS, FL 34134 BONITA SPRINGS, FL 34134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04212006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Number Applied For 59-3419224 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HASTINGS, VIVIEN N Street Address (P.O. Box Number is Not Acceptable) 24301 WALDEN CENTER DRIVE BONITA SPRINGS, FL 34134 Zip Code 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. 05/23/06--01006--015 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. DP Change Addilion DP Delete TITLE TITLE DRUMMOND, PAUL 24301 WALDEN CENTER DAIVE JOHANSSON, STEFAN O NAME NAME 24301 WALDEN CENTER DRIVE STREET ADDRESS STREET ADDRESS BONITA SMINGS, A 34134 CITY-ST-ZIP BONITA SPRINGS, FL 34134 CITY-ST-ZIP ☐ Change Addition DVP Delete TITI F HJORTAAS, ANDREW NAME NAME 24301 WALDEN CENTER STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BONITA SPRINGS, FL 34134 ☐ Delete ☐ Change ☐ Addition TITLE TITLE TIEBOUT-TOUREN, MARCIENNE NAME NAME STREET ADDRESS STREET ADDRESS 24301 WALDEN CENTER BONITA SPRINGS, FL 34134 CITY-ST-78 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition □ Change ☐ Delete TITLE TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 trostee employed to 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 trostee employed to 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 trostee employed to 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 trostee employed to 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 trostee employed to 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 trostee employed to 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 of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation or the receiver of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation of t changed, or on an attachme

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APPROVE AND