2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: _

AND TYPED OR PRINTE

May 03, 2005 8:00 am Secretary of State DOCUMENT # P04000023579 1. Entity Name 05-03-2005 90151 044 ***150.00 AG-RESERVE AT BOYNTON BEACH CORPORATION Principal Place of Business Mailing Address 1401 UNIVERSITY DRIVE 1401 UNIVERSITY DRIVE SUITE 200 CORAL SPRINGS FL 33071 SUITE 200 CORAL SPRINGS FL 33071 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 20-1007491 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 GRANT, MARK F ESQ. Street Address (P.O. Box Number is Not Acceptable) 200 EAST BROWARD BLVD., 15TH FLOOR FORT LAUDERDALE FL 33301 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, SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE DP ☐ Delete THEF **X** Addition Ezratti, lizhak 1401 University Dr. #200 NAME NAME STREET ADDRESS STREET ADDRESS Coral Springs, FL 33071 CITY-ST-ZIP CITY-ST-ZIP VAS TITLE TITLE ☐ Delete ☐ Change Addition Fant, Alan J. 1401 University Dr. #200 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7(P Coral Springs, FL 33071 CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition Costello, Richard A. 1401 University Dr. #200 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Coral Springs, FL 33071 CITY-ST-7IP TITLE ☐ Delete TITLE [7] Change Addition NAME NAME Norwalk, Richard M. 1401 University Dr. #200 STREET ADDRESS STREET ADDRESS Coral Springs, FL 33071 CITY-ST-ZIP CITY-ST-7IP TITLE N. Maria Menendez Addition ☐ Delete TITLE Change NAME NAME 1401 University Dr. #200 STREET ADDRESS STREET ADDRESS Coral Springs, FL 33071 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change **Addition** NAME Corban, Paul 1401 University Dr. #200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Coral Springs, FL 33071 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 suppliemental 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 607, 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.

N. Maria Menendez, Vice President

(954) 753-1730

FILED