2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

Jun 21, 2004 8:00 am Secretary of State DOCUMENT # N05720 06-21-2004 90001 033 ****70.00 DAVIS ISLANDS GARDEN CLUB Principal Place of Business Mailing Address 8400coz. 81 COLUMBIA DRIVE **81 COLUMBIA DRIVE** TAMPA, FL 33606 TAMPA, FL 33606 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 06142004 CR2E037 (10/03) Chg-NP City & State City & State Applied For 4. FEI Number 59-1482942 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SAVAGE, NANCY Street Address (P.O. Box Number is Not Acceptable) 90 ADALIA AVENUE TAMPA, FL 33606 City 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) ---- DATE- ----Filing Fee Is \$61.25 9. Election Campaign Financing **\$5.00** May Be Make check payable to , Trust Fund Contribution. Florida Department of State Due by September 8, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. VPD VPD . · N Delete TITLE TITLE PEGGY GILL 71 MARTINI QUE AVE NAME MYERS; DOTTIE-NAME 3606 SO GUNLOCK AVE STREET ADDRESS STREET ADDRESS TAMPA, PL 33606-4027 TAMPA, FL 336297946 CITY-ST-ZIP CITY-ST-ZIP PD TITLE Delete TIT) F Addition CONNIE URSO BEDAMI, JEANNE NAME NAME 543 LUCERNEAVE. 5396 GULF BOULEVARD #410 STREET ADDRESS STREET ADDRESS TAMPA, FL 33606-4034 SAINT PETERSBURG, FL 337062302 CITY-ST-ZIP CITY-ST-2IP VD П Спалде TITLE Defete TITLE Addition Judy Mª CORMICR 119 Chesapeare Aver WOMBLE, DOTTIE NAME NAME 206 CHIPPEWA AVENUE STREET ADDRESS STREET ADDRESS TAMPA, FL 336063612 TAMPA, FL 33606-3657 CITY - ST- 7IP CITY-ST-ZIP Addition ☐ Delete ☐ Change TITLE TITLE VPD Sasan Stromowist NAME SAVAGE, NANCY NAME STREET ADDRESS 90 ADALIA AVENUE STREET ADDRESS CITY-ST-ZIP TAMPA, FL 336063341 CITY - ST- 7IP TAMPA, PL 33606-3808 ☐ Change TITLE ☐ Delete TITLE Addition SPENCER, SHARI NAME NAME P.O. BOX 66 STREET ADDRESS STREET ADDRESS ODESSA, FL 335560066 CITY-ST-ZIP CMY-ST-ZIP Delete Change --- (XCAddition CSD & Sign of the TITLE TITLE MARY PALORI bog DANNER AV BOGGS, CAROLYN NAME NAME 1 23 0 20 599 MARMARA AVE. ... STREET ADDRESS STREET ADDRESS TAMPA, FL 33606-3917 CITY-ST-ZIP TAMPA, FL 336063922 CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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 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.

FILED