2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006628

FILED Mar 10, 2005 Secretary of State

Entity Name: EAGLE TREE PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O THE RITZ-CARLTON DEV. CO INC. 6649 WESTWOOD BLVD - SUITE 500 ORLANDO, FL 328216090 **Current Mailing Address: New Mailing Address: MVCI-RESORT SERVICES** 6649 WESTWOOD BLVD - SUITE 110 ORLANDO, FL 32821 FEI Number: 02-0539819 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: THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SCHREIBER, SCOTT Name: Name: 6649 WESTWOOD BLVD Address: Address: ORLANDO, FL 32821 City-St-Zip: City-St-Zip: Title: VPD Title: () Delete () Change () Addition FENTON, IRA Name: Name: Address: 11780 US HWY 1, STE 400 Address: City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: Title: () Delete Title: () Change () Addition LEANDRO, SANDY Name: Name: 6649 WESTWOOD BLVD, STE 500 Address: Address: City-St-Zip: ORLANDO, FL 32821 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: KANAVOS, PAUL Name: 650 MADISON AVENUE, 15TH FLOOR Address: Address: City-St-Zip: NEW YORK, NY 10022 City-St-Zip: Title: () Delete Title: (X) Change () Addition HABERMAN, JERRY HALL, WALTER Name: Name: 6649 WESTWOOD BLVD. 6649 WESTWOOD BLVD. Address: Address: City-St-Zip: ORLANDO, FL 32821 City-St-Zip: ORLANDO, FL 32821

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: SANDY LEANDRO T 03/10/2005