2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2005
Secretary of State

DOCUMENT# N28117

Entity Name: SUNNIER PALMS MEMBERS' LODGE, INC.

Current Principal Place of Business:

8800 OKEECHOBEE RD.
FT. PIERCE, FL 34945

New Principal Place of Business:

Current Mailing Address:

8800 OKEECHOBEE RD.
FT. PIERCE, FL 34945

New Mailing Address:

FEI Number: 65-0085597 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WELLS, HERBERT
8800 OKEECHOBEE RD, LOT 12
FT PIERCE, FL 34945 US

Name and Address of New Registered Agent:

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:

Title: VD ( ) Delete
Name: DEJONG, MAYNARD
Address: 8800 OKEECHOBEE RD., #33
City-St-Zip: FT PIERCE, FL 34945

Title: STD ( ) Delete
Name: SHANKS, CATHERINE A
Address: 8800 OKEECHOBEE RD. LOT 23
City-St-Zip: FT. PIERCE, FL 34945

Title: PD ( ) Delete
Name: HAWKESWORTH, RICHARD E
Address: 8800 OKEECHOBEE RD LOT 29
City-St-Zip: FORT PIERCE, FL 34945

Title: D ( ) Delete
Name: PODRAZA, MARK
Address: 8800 OKEECHOBEE RD., #19
City-St-Zip: FORT PIERCE, FL 34945

Title: D ( ) Delete
Name: LAMPORT, JOHN
Address: 8800 OKEECHOBEE RD., #7
City-St-Zip: FORT PIERCE, FL 34945

Title: D ( ) Delete
Name: CRONIN, MARCIA
Address: 8800 OKEECHOBEE RD., #37
City-St-Zip: FORT PIERCE, FL 34945

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition
Name: DEANA, MARTINO
Address: 8800 OKEECHOBEE RD., #27
City-St-Zip: FT PIERCE, FL 34945

Title: TD (X) Change ( ) Addition
Name: PRINCE, RICHARD A
Address: 8800 OKEECHOBEE RD. LOT 26
City-St-Zip: FT. PIERCE, FL 34945

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: PODRAZA, BECKY
Address: 8800 OKEECHOBEE RD., #19
City-St-Zip: FORT PIERCE, FL 34945

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: RICHARD A PRINCE TD 04/10/2005

Electronic Signature of Signing Officer or Director — Date