2006 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Apr 24, 2006 08:00 AN Secretary of State DOCUMENT # P04000137972 1. Entity Name ESPERIA AT BONITA BAY, INC. Principal Place of Business Mailing Address 4200 GULF SHORE BOULEVARD NORTH 4200 GULF SHORE BOULEVARD NORTH NAPLES, FL 34103 NAPLES, FL 34103 03232006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1759009 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CATALANO, ANTHONY J DO NOT WRITE 4001 TAMIAMI TRAIL NORTH **SUITE 250** IN THIS SPACE NAPLES, FL 34103 3. 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 retristating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees U000000528211 10, OFFICERS AND DIRECTORS me LUTGERT, SCOTT F. NAME 4200 GULF SHORE BLVD NORTH STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34103 TITLE NAME BAKER, RICHARD J. STREET ADDRESS 4200 GULF SHORE BLVD, NORTH NAPLES, FL 34103 CITY-ST-ZIP TIME GUTMAN, HOWARD B. NAME 4200 GULF SHORE BLVD. NORTH STREET ADDRESS DO NOT WRITE CITY-ST-ZIE NAPLES, FL 34103 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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 regulatory of 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.

CITY-ST-ZIP

Howard B. Gutman SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

239) 261-6100