2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

DOCUMENT # 389859 1. Entity Name FILED COUNTRY CLUB MOBILE ESTATES, INC. 05 SEP 16 AM 11: 05 Principal Place of Business Mailing Address SEUNLIAKT OF STATE 958 S. HOAGLAND BLVD 958 S. HOAGLAND BLVD KISSIMMEE, FL 34741 TALLAHASSEE, FLORIDA KISSIMMEE, FL 34741 04-28-05 90176 032 \$ 150.00 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1392593 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SUHL, GARY W DO NOT WRITE 958 S. HOAGLAND BLVD KISSIMMEE, FL 34741 IN THIS SPACE 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. W SWN (9-13-05 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by October 1, 2005 10. OFFICERS AND DIRECTORS TITLE SUHL, GARY NAME 800059796978 09/21/05--01002--009 **400.00 958 S. HOAGLAND BLVD STREET ADDRESS CITY-ST-ZIP KISSIMMEE, FL 34741 NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE JR9/10 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in changed, or on an attachment with an address, with all other like empowered.

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