2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2010
Secretary of State

DOCUMENT# 713370

Entity Name: HOLIDAY OUT AT ST. LUCIE, A CONDOMINIUM

Current Principal Place of Business:

10725 S. OCEAN DR.
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

10725 S. OCEAN DR.
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 59-1276830 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARVEY, MARY R ESQ.
MARY R. HARVEY ESQUIRE, P.A.
850 NW FEDERAL HIGHWAY
STUART, FL 34994 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: SD
Name: CAPWELL, CHARLES
Address: 321 HOLIDAY OUT
City-St-Zip: JENSEN BEACH, FL 34957

Title: VPD
Name: KUEGLER, LINDA
Address: 24 HOLIDAY OUT
City-St-Zip: JENSEN BCH, FL 34957

Title: TD
Name: BRICKMAN, JACK
Address: 282 HOLIDAY OUT
City-St-Zip: JENSEN BCH, FL 34957

Title: PD
Name: LANE, LOIS
Address: 401 HOLIDAY OUT
City-St-Zip: JENSEN BCH, FL 34957

Title: D
Name: BLANCHARD, GLEN
Address: 52 HOLIDAY OUT
City-St-Zip: JENSEN BCH, FL 34957

Title: D
Name: MCCANN, RICHARD
Address: 443 HOLIDAY OUT
City-St-Zip: JENSEN BEACH, FL 34957

I hereby 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 all other like empowered.

SIGNATURE: CHARLES CAPWELL SD 04/20/2010

Electronic Signature of Signing Officer or Director — Date