2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#716281

FILED Mar 13, 2005 Secretary of State

Entity Name: EVERETT ARMS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3550 N.W. 8TH AVENUE POMPANO BEACH, FL 33064

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 8730 DEERFIELD BEACH, FL 334438730 US

FEI Number: 57-0540136 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:

RATLIFF, CARY L 706 S.E. 2ND AVENUE. #436 DEERFIELD BEACH, FL 33441 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete GAEGORY, DANIEL GUIMARD, LAVONNA Name: Name: 3550 NW 8 AVE., #512 Address: 3550 NW 8 AVE., #607 Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: POMPANO BEACH, FL 33064

Title: VD () Delete Title: VD (X) Change () Addition GULBRANSEN, RICHARD Name: MCCOY, RANDY Name:

Address: 3550 NW 8 AVE., #316 Address: 3550 NW 8 AVE., #511 City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: POMPANO BEACH, FL 33064

Title: () Delete Title: SD (X) Change () Addition

CIARAMEUA, SILVIO SIEFERS, BARRY Name: Name: 3550 NW 8 AVE., #806 3550 NW 8 AVE., #306 Address: Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: POMPANO BEACH, FL 33064

() Delete Title: TD Title: (X) Change () Addition

GARGARDO, NICOLO Name: Name: CIARAMELLA, SILVIO 3550 NW 8 AVE., #214 Address: Address: 3550 NW 8 AVE., #806 City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: POMPANO BEACH, FL 33064

Title: () Delete Title: () Change () Addition

MARIANO, ANN Name: Name: 3550 NW 8 AVE., #413 Address: Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

MCDUFFEE, MARY JANE JOHNSON, HAROLD Name: Name: Address: 3550 NW 8 AVE., #613 Address: 3550 NW 8 AVE., #108 POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064 City-St-Zip: 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: LAVONNA GUIMARD PTD 03/13/2005