2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Aug 08, 2005 8:00 am Secretary of State **DOCUMENT #726829** 08-08-2005 90046 037 ****61.25 DELRAY DUNES GARDEN VILLAS, INC. Principal Place of Business Mailing Address 5 GARDEN DR 50060362 5 GARDEN DR BOYNTON BEACH, FL 33436-5502 US BOYNTON BEACH, FL 33436-5502 US 2. Principal Place of Business 3. Mailing Address II GARDEN DRIVE II GARDEN DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. 08022005 CR2E037 (10/03) City & State City & State 4. FEI Number Applied For 59-1583896 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCCUTCHEN, BILLIE H Street Address (P.O. Box Number is Not Acceptable) 11 GARDEN DRIVE BOYNTON BEACH, FL 33436 City Zip Code 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by September 7, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition TITLE **Delete** TITLE ☐ Change NAME STEIN, ABBE NAME STREET ADDRESS 4 GARDEN DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOYNTON BEACH, FL 33436 TITLE ☐ Delete TITLE Change ☐ Addition MCCUTCHEN, BILLIE H NAME NAME STREET ADDRESS STREET ADDRESS 11 GARDEN DR CITY-ST-ZIP BOYNTON BEACH, FL 33436 CITY-ST-ZIP ☐ Delete TITLE X Change Addition TITLE ROBERT, CHRIS OCHS ROBERT C. JR NAME NAME STREET ADDRESS 3 GARDEN DR. STREET ADDRESS BOYNTON BEACH, FL 33436 CITY-ST-ZIP CITY-ST-ZIP See Y/D Change TO E ■ Addition TITLE ☐ Delete MEADE, LEE NAME NAME STREET ADDRESS 2 GARDEN DR. STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33436 CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE HARVEY, WILLIAM NAME NAME STREET ADDRESS GGARDEN DRIVE STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP BOYNTON BEACH, FL 33436 Addition Delete TITLE TITLE NAME POTTER, GREGORY NAME 14 GARDEN BRIVE BOYNTON BEACH FL 33436 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). 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 617, 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.

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NING OFFICER OR DIRECTOR

SIGNATURE: