2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: APPLE CREEK UNIT TWO, INC.

Current Principal Place of Business:

APPLE CREEK REC. CNT.
7301 W SUNRISE BLVD
PLANTATION, FL 33313 US

New Principal Place of Business:

APPLE CREEK RECCREATION CENTER
7301 W SUNRISE BLVD
PLANTATION, FL 33313 US

Current Mailing Address:

APPLE CREEK REC. CNT.
7301 W SUNRISE BLVD
PLANTATION, FL 33313 US

New Mailing Address:

APPLE CREEK RECREATION CENTER
7301 W SUNRISE BLVD
PLANTATION, FL 33313 US

FEI Number: 59-1698257 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOBART, ROBERT
7301 W SUNRISE BLVD
PLANTATION, FL 33313 US

Name and Address of New Registered Agent:

MAXIMUM MANAGEMENT
7301 W SUNRISE BLVD
PLANTATION, FL 33313 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: MAXIMUM MANAGEMENT 04/09/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP
Name: FITGERALD, ROBERT
Address: 7301 W. SUNRISE BLVD.
City-St-Zip: PLANTATION, FL 33313

Title: DS
Name: ADAMS, KIM
Address: 7301 W. SUNRISE BLVD.
City-St-Zip: PLANTATION, FL 33313

Title: DT
Name: CHOKSI, SHEFALI
Address: 7301 W SUNRISE BLVD
City-St-Zip: PLANTATION, FL 33313

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: MAXIMUM MANAGEMENT RA 04/09/2012
Electronic Signature of Signing Officer or Director Date