2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Apr 28, 2006 8:00 am Secretary of State DOCUMENT #741159 04-28-2006 90181 012 ****61.25 1. Entity Name APPLE CREEK UNIT SIX, INC. Principal Place of Business Mailing Address 40069819 7301 W SUNRISE BLVD 7301 W SUNRISE BLVD PLANTATION, FL 33313 PLANTATION, FL 33313 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04182006 Chg-NP CR2E037 (11/05) City & State City & State Applied For 4. FEI Numbe 59-1863274 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 HOBART, ROBERT Street Address (P.O. Box Number is Not Acceptable) 7301 W. SUNRISE BLVD PLANTATION, FL 33313 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD TITLE TITLE ☐ Delete ☐ Addition NAME BAGNALL, CHRISTOPHER NAME 7507 W SUNRISE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33313. CITY-ST-ZIP ☐ Change TITLE ∩ Detete TITLE **D**d Addition PAGAN, WOODROW NAME NAME 7505W. Surrise Blud STREET ADDRESS 7551 W SUNRISE BLVD STREET ADDRESS Plantation FU 33313 CITY-ST-ZIP PLANTATION, FL CITY-ST-ZIP DS TITLE Delete TITLE ☐ Change ■ Addition NAME BIRD: JANETTE NAME 7569 W SUNRISE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 00000, CITY-ST-ZIP πĿ DVP ☐ Delete ☐ Change ☐ Addition NAME FISHER, STEWART NAME 7543 W SUNRISE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANTATION, FL CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition HENDERSON, HERMDU NAME NAME STREET ADDRESS 7523 CI W SUNRISE BLVD STREET ADDRESS CITY-ST-ZIP PLANTATION, FL 33313 CITY-ST-ZIP TITLE ☐ Change ☐ Addition ☐ Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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.

FILED

Daytime Phone #