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

Secretary of State DOCUMENT #743797 02-18-2005 90054 014 ****61.25 THE MAPLE WOOD ISLE ASSOCIATION, INC. 50014221 Principal Place of Business Mailing Address PHOENIX MANAGEMENT PHOENIX MANAGEMENT 4730 N ST RD 7 E 250 4730 N ST RD 7 E 250 FORT LAUDERDALE, FL 33319 FORT LAUDERDALE, FL 33319 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01062005 Cha-NP CR2E037 (10/03) 4. FEI Number NOT APPLICABLE City & State City & State Applied For Not Applicable Country 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 C/O PHOENIX MANAGEMENT SERVICES, INC. 4780 N ST RD SEVEN #250 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE, FL 33319 City Zip Code FI 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 DATE (NOTE: Registered Agent signature required when reinstating) Make check payable to t 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Florida Department of State П Trust Fund Contribution. Due by May 1, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. ☐ Delete TITLE TITLE SPOLIANSKY, JOLI NAME NAME STREET ADDRESS 1722 VESTAL DR. STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33071 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition HILL, THOMAS NAME NAME 10258 VECTAL MANOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP CORAL SPRINGS, FL 33071 ☐ Delete TITLE TITLE Change ■ Addition GETTER, JODIE NAME NAME 10038 VESTAL PLACE STREET ADDRESS STREET ADDRESS CORAL SPRINGS, FL 33071 CITY-ST-ZIP

NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, 1 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 a paddress, with all other like empowered.

TITLE

MAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP TITLE

NAME

TITLE

MARC, NORYCH 10263 VESTAL MANOR

BARNEA, BGN

CORAL SPRINGS, FL 33071

CORAL SPRINGS, FL 33071 /

10263 VESTAL MANOR

INTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

Delete

FILED Feb 18, 2005 8:00 am

☐ Change

☐ Change

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Addition

Addition