2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005
Secretary of State

DOCUMENT# 743840

Entity Name: MARINER SANDS COUNTRY CLUB, INC.

Current Principal Place of Business:

6500 MARINER SANDS DRIVE
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

6500 MARINER SANDS DRIVE
STUART, FL 34997

New Mailing Address:

FEI Number: 59-2147192 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GERSTNER, LARRY C
6500 MARINER SANDS DRIVE
STUART, FL 34997 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HEFFRON, FRANK
Address: 6440 SE MARINER SANDS DR.
City-St-Zip: STUART, FL 34997

Title: VD ( ) Delete
Name: DWYER, WILLIAM
Address: 6780 SE PACIFIC DR.
City-St-Zip: STUART, FL 34997

Title: TD ( ) Delete
Name: COATES, CHARLES
Address: 6601 SE BARRINGTON DR.
City-St-Zip: STUART, FL 34997

Title: SD ( ) Delete
Name: PARRILLI, JAMES
Address: 6200 SE MARINER SANDS DR.
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: MORAN, JOHN
Address: 5653 SE FOXCROSS PLACE
City-St-Zip: STUART, FL 34997

Title: VD (X) Change ( ) Addition
Name: ANDREWS, ROBERT
Address: 6756 SE PACIFIC DRIVE
City-St-Zip: STUART, FL 34997

Title: PD (X) Change ( ) Addition
Name: COATES, CHARLES
Address: 6601 SE BARRINGTON DR.
City-St-Zip: STUART, FL 34997

Title: SD (X) Change ( ) Addition
Name: WITHERWAX, JANE
Address: 6623 SE BARRINGTON DRIVE
City-St-Zip: STUART, FL 34997

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: JACK MORAN TD 05/03/2005

Electronic Signature of Signing Officer or Director — Date