2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745192

Apr 13, 2004 Secretary of State

Entity Name: SUNFEST OF PALM BEACH COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business:

525 CLEMATIS STREET

WEST PALM BEACH, FL 33401 US

Current Mailing Address: New Mailing Address:

525 CLEMATIS STREET

WEST PALM BEACH, FL 33401 US

FEI Number: 59-1864355 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAYANS, STEVEN A C/O FITZGERALD HAWKINS MAYANS & COOK, PA 515 NORTH FLAGLER DR SUITE 900 WEST PALM BEACH, FL 33401 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition

PPD () Delete JOHNSON, JOHN M FAGAN, GREGORY Name: Name: 176 MONTEREY WAY Address: 170 LOST BRIDGE DRIVE Address:

City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: PD () Delete Title: (X) Change () Addition

SARTORY-LINK, WENDY Name: SARTORY-LINK, WENDY Name:

Address: 7696 BLOD LAD ROAD Address: 5222 DESERT VIXEN

City-St-Zip: PALM BEACH GARDENS, FL 33411 City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MD () Delete Title: () Change () Addition

JAMIESON, PAUL Name: Name: Address: 6720 NW 25TH WAY Address: City-St-Zip: FORT LAUDERDALE, FL City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition

VIROSTEK, GWYNN Name: Name: VIROSTEK, GWYNN Address: 2741 NE 8TH COURT Address: 3830 NE 24TH AVENUE City-St-Zip: POMPANO BEACH, FL 33062 City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: SPED () Delete Title: (X) Change () Addition

JONETHIS, TERRY JONETHIS, TERRY Name: Name:

1231 SINGER DRIVE 1019 SHADY LAKES CIRCLE Address: Address: PALM BEACH GARDENS, FL 33418 City-St-Zip: RIVIERA BEACH, FL 33408 City-St-Zip:

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: PAUL JAMIESON MD 04/13/2004