2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# 752841

Entity Name: BUENA VIDA ESTATES, INCORPORATED

Current Principal Place of Business:

2129 W. NEW HAVEN AVE.
W. MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

2129 W. NEW HAVEN AVE.
W. MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 64-0639722 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOHRR, P.F.
1800 W. HIBISCUS BLVD.
STE 138
MELBOURNE, FL 32901 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: D ( ) Delete
Name: RIDENOUR, JIM
Address: 2101 W. NEW HAVEN AVE.
City-St-Zip: MELBOURNE, FL 32904

Title: STD ( ) Delete
Name: BRETT, JOSEPH,
Address: 300 NASA BLVD
City-St-Zip: MELBOURNE, FL

Title: ASD ( ) Delete
Name: MANCO-HERRMAN, ELIZABETH
Address: 6163 ARLINGTON CIRCLE
City-St-Zip: MELBOURNE, FL 32940

Title: ASD ( ) Delete
Name: BUTLER, JOHN E
Address: 200 OAK STREET
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: PAVLAKOS, DEBRA
Address: 100 S. SYKES CREEK PKWY
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D ( ) Change (X) Addition
Name: HANNA, EMMA
Address: 1482 MEADOWBROOK ROAD, NE
City-St-Zip: PALM BAY, FL 32905

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: JIM RIDENOUR D 04/27/2004
Electronic Signature of Signing Officer or Director — Date

STEVE GARDINER
2995 LIMPET COURT
INDIALANTIC, FL 32903