2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 26, 2004
Secretary of State

DOCUMENT# F01000002843

Entity Name: CNLRS EQUITY VENTURES, INC.

Current Principal Place of Business:

450 S. ORANGE AVE.
SUITE 900
ORLANDO, FL 328013336

New Principal Place of Business:

Current Mailing Address:

450 S. ORANGE AVENUE
SUITE 900
ORLANDO, FL 328013336

New Mailing Address:

FEI Number: 59-3720143 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VSTD ( ) Delete
Name: HABICHT, KEVIN B
Address: 450 S. ORANGE AVE., SUITE 900
City-St-Zip: ORLANDO, FL 328013336

Title: PD ( ) Delete
Name: TRACY, DENNIS E
Address: 450 S. ORANGE AVE., SUITE 900
City-St-Zip: ORLANDO, FL 328013336

Title: ASEV ( ) Delete
Name: WHITEHURST, JULIAN A
Address: 450 S. ORANGE AVE., SUITE 900
City-St-Zip: ORLANDO, FL 328013336

Title: D ( ) Delete
Name: RALSTON, GARY M
Address: 450 S. ORANGE AVE., SUITE 900
City-St-Zip: ORLANDO, FL 328013336

Title: SVP ( ) Delete
Name: BALLEW, DAVID F
Address: 450 S. ORANGE AVENUE, SUITE 900
City-St-Zip: ORLANDO, FL 328013336

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: EVPD (X) Change ( ) Addition
Name: TRACY, DENNIS E
Address: 450 S. ORANGE AVE., SUITE 900
City-St-Zip: ORLANDO, FL 328013336

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

Title: VP (X) Change ( ) Addition
Name: WILKES, MARY
Address: 450 S. ORANGE AVE., SUITE 900
City-St-Zip: ORLANDO, FL 328013336

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

Title: AS ( ) Change (X) Addition
Name: SCHAIBLE, KELLA W
Address: 450 S. ORANGE AVENUE, SUITE 900
City-St-Zip: ORLANDO, FL 328013336

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIAN E. WHITEHURST EVP 05/26/2004

Electronic Signature of Signing Officer or Director — Date