2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005
Secretary of State

DOCUMENT# F96000004775

Entity Name: FLORIDA OSCEOLA MANAGEMENT, INC.

Current Principal Place of Business:

17757 US 19 NORTH
STE 275
CLEARWATER, FL 33764 US

New Principal Place of Business:

17757 US HWY 19 N
STE 275
CLEARWATER, FL 33764 US

Current Mailing Address:

17757 US 19 NORTH
STE 275
CLEARWATER, FL 33764 US

New Mailing Address:

17757 US HWY 19 N
STE 275
CLEARWATER, FL 33764 US

FEI Number: 59-3247508 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARNOLD, LEE E JR
17757 US 19 NORTH
STE 275
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

ARNOLD, LEE E JR
17757 US HWY 19 N
STE 275
CLEARWATER, FL 33764 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: _____ 04/22/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BROWN, ROBERT G
Address: 17757 US 19 NORTH, STE 325
City-St-Zip: CLEARWATER, FL 33764

Title: VP ( ) Delete
Name: BROWN, JARED D
Address: 17757 US 19 NORTH, STE 325
City-St-Zip: CLEARWATER, FL 33764

Title: ST ( ) Delete
Name: ARNOLD, LEE E
Address: 17757 US 19 NORTH, STE 275
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BROWN, ROBERT G
Address: 17757 US HWY N, STE 325
City-St-Zip: CLEARWATER, FL 33764

Title: VP (X) Change ( ) Addition
Name: BROWN, JARED D
Address: 17757 US 19 HWY N, STE 325
City-St-Zip: CLEARWATER, FL 33764

Title: ST (X) Change ( ) Addition
Name: ARNOLD, LEE E
Address: 17757 US HWY 19 N, STE 275
City-St-Zip: CLEARWATER, FL 33764

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: JARED D. BROWN VP 04/22/2005
Electronic Signature of Signing Officer or Director — Date