2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # G93297 02-24-2005 90043 011 ***150.00 1. Entity Name SEA OAKS BEACH & TENNIS CLUB, INC. Principal Place of Business Mailing Address 1235 WINDING OAKS CIRCLE 1235 WINDING OAKS CIRCLE 50018690 VERO BEACH, FL 32963 VERO BEACH, FL 32963 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 02012005 Cha-P Applied For 4. FEI Number City & State City & State 59-2492496 Not Applicable Country Zip Country Zip \$8.75 Additional Fee Required 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Pamela S. Dawson SUMBERG, JOHN C P.A. Street Address (P.O. Box Number is Not Acceptable) 1235 Winding Oaks Circle 200 SOUTH BISCAYNE BLVD **SUITE 2500** MIAMI, FL 33131 Zip Code 32963 Vero Beach statement of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits th the obligations of registered ager SIGNATURE. (NOTE: Registered Agent signature required when reinstating) ed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE TITLE ☐ Addition Ρ BRION, JACQUES NAME MARKE Robert McInnis 1235 WINDING OAKS CIRCLE STREET ADDRESS STREET ADDRESS 1235 Winding Oaks Circle CITY-ST-ZIP CITY-ST-ZIP VERO BEACH, FL 32963 Vero Beach, FL 32963 Delete TITLE TETLE ☐ Addition BONNET, ERIC NAME NAME Dulany Foster STREET ADDRESS 1235 WINDING OAKS CIRCLE STREET ADDRESS 1235 Winding Oaks Circle CITY-ST-ZIP VERO BEACH, FL 32963 CITY-ST-7IP Vero Beach, FL 32963-TIŤLE Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS Joyce Carlson CITY - ST - ZIP CITY-ST-ZIP 1235 WindingfOaks Circle Vero Beach's, FL 32963 TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS Robert Gillis CITY-ST-ZIP CITY-ST-ZIP 1235 Winding Oaks Circle ☐ Delete ☐ Change ☐ Addition Vero Beach, FL 32963 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 24, 2005 8:00 am

Daytime Phone #