2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2011
Secretary of State

DOCUMENT# G94884

Entity Name: LAKE SEMINOLE RESORT SOUTH RESIDENCE, INC.

Current Principal Place of Business:

8201 SEMINOLE BLVD
SEMINOLE, FL 33772

New Principal Place of Business:

Current Mailing Address:

8201 SEMINOLE BLVD
SEMINOLE, FL 33772

New Mailing Address:

FEI Number: 59-2389868 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
311 PARK PLACE BLVD.
SUITE 250
CLEARWATER, FL 33759 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: PD
Name: GRAY, ELEANOR
Address: 102 GORDON DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: VD
Name: LESSARD, ROBERT
Address: 620 LAKESIDE DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: D
Name: EMBREY, MARLYN
Address: 234 CAROL DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: D
Name: ROBERT, HALPIN
Address: 614 LAKESIDE DRIVE
City-St-Zip: SEMINOLE, FL 33772

Title: SD
Name: SMITH, HOWARD
Address: 444 DENICE DR.
City-St-Zip: SEMINOLE, FL 33772

Title: TD
Name: FITCH, WILLIAM
Address: 133 GORDON DR.
City-St-Zip: SEMINOLE, FL 33772

I hereby 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 all other like empowered.

SIGNATURE: ELEANOR GRAY PRES 03/14/2011

Electronic Signature of Signing Officer or Director — Date