2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K23076

FILED Apr 27, 2005 Secretary of State

Entity Name: NORTH AMERICAN PROPERTIES - SOUTHEAST, INC.

Current Principal Place of Business: New Principal Place of Business: 7500 COLLEGE PARKWAY FT. MYERS, FL 33907 **Current Mailing Address: New Mailing Address:** 7500 COLLEGE PARKWAY FT. MYERS, FL 33907 FEI Number: 31-1239448 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAFELE, DALE G HAFELE, DALE G 7500 COLLEGE PARKWAY 7500 COLLEGE PARKWAY FT. MYERS, FL 33907 FT. MYERS, FL 33907 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: DALE G. HAFELE 04/27/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition WILLIAMS, THOMAS L., WILLIAMS, THOMAS L Name: Name: 212 E. THIRD ST 212 E. THIRD ST Address: Address: City-St-Zip: CINCINNATI, OH 45202 City-St-Zip: CINCINNATI, OH 45202 Title: Title: () Delete () Change () Addition Name: WILLIAMS, JOSEPH W JR. Name: 212 E THIRD ST STE 300 Address: Address: CINCINNATI, OH 45202 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition DPS () Delete DPS HAFELE, DALE G., HAFELE, DALE G Name: Name: 7500 COLLEGE PARKWAY 7500 COLLEGE PARKWAY Address: Address: City-St-Zip: FT. MYERS, FL 33907 City-St-Zip: FT. MYERS, FL 33907 Title: () Delete Title: () Change () Addition SPREHN, SUSAN M Name: Name: Address: 7500 COLLEGE PARKWAY Address: City-St-Zip: FT MYERS, FL 33907 City-St-Zip: Title: Title: () Delete () Change () Addition MCINTYRE, SHAWN R Name: Name: 7500 COLLEGE PARKWAY Address: Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip:

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: SUSAN M. SPREHN VT 04/27/2005