2007 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT #L01290 03-06-2007 90001 035 ***158.75 1. Entity Name LAKEWOOD RANCH CORPORATE PARK, INC. Principal Place of Business Mailing Address 14400 COVENANT WAY 14400 COVENANT WAY 40029821 BRADENTON, FL 34202 US BRADENTON, FL 34202 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01292007 CR2E034 (12/06) Chg-P City & State City & State 4. EEI Number Applied For 65-0247024 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHIOFALO ANTHONY J. Street Address (P.O. Box Number is Not Acceptable) 14400 COVENANT WAY BRADENTON, FL 34202 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE ☐ Change Addition NAME POKRYWA, TODD NAME STREET ADDRESS 14400 COVENANT WAY STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34202 CITY-SI-ZIP STERETARY, TREASURER AME) VP TITLE ☐ Delete ■ Addition CHIOFALO, ANTHONY NAME NAME STREET ADDRESS 14400 COVENANT WAY STREET ADDRESS BRADENTON, FL 34202 CITY-ST-ZIP CITY-ST-7IP Р MILE ☐ Delete HILL Change Change Addition JENSEN, REX NAME STREET ADDRESS 14400 COVENANT WAY STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34202 CITY - ST - ZIP TITLE VΡ Delete TITLE Change ☐ Addition NAME MARTIN, TIM NAME 14400 COVENANT WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34202 C11Y-\$1-ZIP VILLE PRESIDENT, ASSTANT Change TITLE ☐ Delete TITLE PERKA DANIEL T. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report is 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 liber empowered.

NAME OF SIGNING

SIGNATURE:

ENTHONY J. CHIOFALO 211.0

941-157-1626

Daytinie Phone

FILED Mar 06, 2007 8:00 am