2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002027

Entity Name: MIRASOL CLUB, INC.

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8430 ENTERPRISE CIRCLE, SUITE 100 BRADENTON, FL 342024108

Current Mailing Address: New Mailing Address:

8430 ENTERPRISE CIRCLE, SUITE 100 BRADENTON, FL 342024108

FEI Number: 65-1000062 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:

SPENCER, MARC I 877 EXECUTIVE CENTER DRIVE W. SUITE 205 ST. PETERSBURG, FL 337022472 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: PERNA, CRAIG A Name: PERNA, CRAIG A Address: 11400 NURSERY LANE PD (X) Change () Addition Name: PERNA, CRAIG A 11642 MIRASOL WAY

City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VSD () Delete Title: VSD (X) Change () Addition Name: CHOROST, AARON Name: CHOROST, AARON

Address: 11400 NURSERY LANE Address: 11642 MIRASOL WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DT () Delete Title: DT (X) Change () Addition

 Name:
 LANE, MICHAEL
 Name:
 LANE, MICHAEL

 Address:
 11400 NURSERY LANE
 Address:
 11642 MIRASOL WAY

City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: AS () Delete Title: AS (X) Change () Addition Name: SPENCER, MARC I Name: SPENCER, MARC I

Address: 8430 ENTERPRISE CIRCLE, SUITE 100 Address: 877 EXECUTIVE CENTER DRIVE W., STE 205

City-St-Zip: BRADENTON, FL 342024108 City-St-Zip: ST. PETERSBURG, FL 337022472

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG A. PERNA P 04/30/2005