2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# N00000002394

Entity Name: MIRASOL MASTER MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

11400 NURSERY LANE
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

8430 ENTERPRISE CIRCLE, STE 100
BRADENTON, FL 342024108

Current Mailing Address:

8430 ENTERPRISE CIRCLE, STE 100
BRADENTON, FL 342024108

New Mailing Address:

FEI Number: 65-1001861 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPENCER, MARC I
877 EXECUTIVE CENTER DR. W
SUITE 205
ST. PETERSBURG, FL 337022472 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 ( ) Delete
Name: PERNA, CRAIG A
Address: 11400 NURSERY LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VDAT ( ) Delete
Name: CHOROST, AARON M
Address: 11400 NURSERY LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: DV ( ) Delete
Name: CLEMENT, EDMUND R JR
Address: 11400 NURSERY LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VST (X) Delete
Name: BRATT, C. ALEXANDER
Address: 8430 ENTERPRISE CIRCLE, STE 100
City-St-Zip: BRADENTON, FL 342024108

Title: AS ( ) Delete
Name: SPENCER, MARC I
Address: 877 EXECUTIVE CENTER DR. W., STE 205
City-St-Zip: ST. PETERSBURG, FL 337022472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: PERNA, CRAIG A
Address: 11642 MIRASOL WAY
City-St-Zip: PALM BEACH GARDENS, FL 334186201

Title: VDAT (X) Change ( ) Addition
Name: CHOROST, AARON M
Address: 11642 MIRASOL WAY
City-St-Zip: PALM BEACH GARDENS, FL 334186201

Title: DV (X) Change ( ) Addition
Name: CLEMENT, EDMUND R JR
Address: 11642 MIRASOL WAY
City-St-Zip: PALM BEACH GARDENS, FL 334186201

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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 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

Electronic Signature of Signing Officer or Director — Date