2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004171

FILED Apr 29, 2005 Secretary of State

Entity Name: CARISBROOKE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1787 BRACKENHURST PL 882 JACKSON AVE LAKE MARY, FL 32746 WINTER PARK, FL 32789 **Current Mailing Address: New Mailing Address:** 1787 BRACKENHURST PL 882 JACKSON AVE LAKE MARY, FL 32746 WINTER PARK, FL 32789 FEI Number: 59-3663236 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: OMETRIAS D. LONG, P.A SPECIALTY MANAGEMENT 400 S. PARK AVE., SUITE 150 882 JACKSON AVE WINTER PARK, FL 32789 WINTER PARK, FL 32789 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: BRETT M JORDAN 04/29/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CILFERS, KRISTEN Name: Name: 1888 BRACKENHURST PL Address: Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: () Delete Title: VD (X) Change () Addition OLSON, MARY J Name: SADOWSKI, ALAN Name: Address: 1876 BRACKENHURST PL Address: 1762 BRACKENHURST PL City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746 Title: (X) Delete Title: () Change () Addition BERNIER, GLEN Name: Name: 1787 BRACKENHURST PL Address: Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: (X) Delete Title: () Change () Addition RUTLAND, SONDRA Name: Name: 1870 BRACKENHURST PL Address: Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: Title: () Delete Title: STD (X) Change () Addition HOUSTON, SHENON HOUSTON, SHENON Name: Name: 1763 BRACKENHURST PL 1763 BRACKENHURST PL Address: Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746 Title: () Delete Title: () Change () Addition BONDURANT, JEANNETTE Name: Name: Address: 1894 BRACKENHURST PL Address: LAKE MARY, FL 32746 City-St-Zip: 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: KRISTEN CILFERS P 04/29/2005