2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N01000008205 **Secretary of State** 1. Entity Name 02-27-2006 90110 015 ****70.00 DRIFTWOOD COVE TOWNSHOUSES, INC. Principal Place of Business Mailing Address 16501 N E 26 AVE N MIAMI BEACH FL 33160 15501 N E 26 AVE N MIAMI BEACH FL 33160 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) 4. FE! Number Applied For 65-0057007 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent BRAUTIGAM, BRENT H 16501 N.E. 26TH AVENUE N MIAMI BEACH EL 33160 8. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent 2-10-06 DATE SIGNATURE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete TITLE Addition Laurence, Bob ESPINOSA, HORACIO NAME NAME 16509 NE 210 Are. 16511 NE 26 AVE STREET ADDRESS STREET ADDRESS N MIAMI BCH FL 33160 CITY-ST-78 CITY-ST-7iP ☐ Addition Delete TITLE TITLE BRAND, DAVID NAME NAME 2641 NE 165 ST STREET ADDRESS STREET ADDRESS N MIAMI BCH FL 33160 CITY-ST-ZIP CITY-ST-ZIP TITLE Charge - Addition -Nelson Ronald 16505 NEZGAVE. BRAUTIGAM, BARBARA NAME NAME 16501 N E 26 AVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP N MIAMI BEACH FL 33160 CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE Bonet Ana 16505 NE 26 Ave. SUCHOTINE, NATALIE NAME STREET ADDRESS 16507 N E 26 AVE STREET ADDRESS CITY-ST-ZIP N MIAMI BCH FL 33160 CITY-ST-ZIP NMB FL 33160 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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 in Block 10 or Block 11 if changed, or on an attachment and address, with all other like empowered.

SIGNATURE:

10-06

FILED

Feb 27, 2006 8:00 am