2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N02000007813

FILED Apr 09, 2007 8:00 am Secretary of State 04-09-2007 90092 045 ****61.25

Principal Prace of Business 4380 LS HGPHAY 4380 LS		LLAGE T	OWER III AT GRA SSOCIATION, INC								
Substance Subs	4380 US HIGHWAY			4380 US HIGHWAY			4005	4330			
Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc. D3292007 Chg-NP CR2E37 (17/06) City & State City & State A FEI Number 22-3878262 Ascelled For 22-3878262 Not Applicated Professional Part of Country Zp Country S. Certificate of Status Desired \$8,75 Auditional Professional					67		 	1 			
City & State Country Country Country S. Continue of Status Desired So. 75 Additional Factorish Registered Agent Name Name Name Name Name Name Name Name Street Address of New Registered Agent City FL Zip Code City FL Zip Code City FL Zip Code S. The above named enlysquedrate the statement for the purpose of changing its registered effice or registered agent, or both, in the State of Fordia. Lam tamalar with and accept the obligations of registered agent SIGNATURE SIGNA	2. Principal Place of Business - No P O. Box #			3. Mailing Address				J			
22-38F8262 Not Applicable	Suite, Apt. #, etc.		Suite, Apt. #. etc			03292007 C	Chg-NP	CR2E037			
S. Cernicates	City & State			City & State				62		_ 	· · · · · · · · · · · · · · · · · · ·
SPEECHLY, QLIFFORD S JR 4380 US HIGHWAY # 1 VERO BEACH, FL 32967 City FL Zip Code	Zip Country		<u> </u>	ip Country							
SPEECHLY, QLIFFORD S JR 4380 US HIGHWAY #1 VERO BEACH, FL 32967 City FL Zip Code 8. The above named antispecialized sepent for the purpose of changing its registered diffice or registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligations of registered agent, or both, in the State of Portida. Lam familiar with, and accept the obligation of Portida Department of State	6. Name and Address of Current			Registered Agent			7. Name and Ad	dress of New Re	gistered A	gent	
City FL Zip Code	4380 US HIGHWAY						P.O. Box Number is	Not Acceptable)		
B. The above named enlig submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent. SIGNATURE Signulus, have or peried hard of registered agent and lateral washbable. (NOTE Registered Agent signature reducted agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent, or both, in the State of Florida. I am lamiliar with, and accept the state of Florida Department of State Andreas of Florida Department of S	1	ACH, FL 3	2967								
SIGNATURE Signature, type or present name of registered agent accelerate (note Angelore Agent sprature required when remaining) DATE					City				FL	Zip Cod	le
Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State	the obligat	lions of registe	ered agent					n the State of Flor		milíar with,	and accept
Title NAME REESE, AKAN A380 US HIGHWAY, # 1 Change Addition STREET ADDRESS A380 US HIGHWAY, # 1 Change Addition Addition A380 US HIGHWAY, # 1 Change A380 US HIGHWAY, # 1 Change A380 US HIGHWAY, # 1 Change A380 US HIGHWAY, # 1 C											
REESE, AKAN SIRET ADRESS 4380 US HIGHWAY, # 1 VERO BEACH, FL 32967 TITLE OP NORTH, ANNABEL 4380 US HIGHWAY, # 1 VERO BEACH, FL 32967 TITLE OST USET ADRESS 4380 US HIGHWAY, # 1 VERO BEACH, FL 32967 TITLE OST USET ADRESS 4380 US HIGHWAY, # 1 VERO BEACH, FL 32967 TITLE OST USET ADRESS 4380 US HIGHWAY, # 1 VERO BEACH, FL 32967 TITLE OST USET ADRESS 4380 US HIGHWAY, # 1 VERO BEACH, FL 32967 TITLE OST USET ADRESS 4380 US HIGHWAY, # 1 VERO BEACH, FL 32967 TITLE OST USET ADRESS 4380 US HIGHWAY, # 1 VERO BEACH, FL 32967 TITLE M STREET ADRESS CITY-ST-2P VERO BEACH, FL 32967 TITLE MAME SPEECHLY, CLIFFORD S JR SIREET ADRESS CITY-ST-2P VERO BEACH, FL 32967 TITLE OBDET TITLE MAME SPEECHLY, CLIFFORD S JR SIREET ADRESS CITY-ST-2P TITLE MAME SIREET ADRESS TITLE TORT MAME SIREET ADRESS TITLE TORT MAME SIREET ADRESS TIT								1			
CITY-ST-ZIP VERO BEACH, FL 32967 INTE DP NORTH, ANNABEL SIREET ADDRESS GITY-ST-ZIP VERO BEACH, FL 32967 INTE DST SIREET ADDRESS GITY-ST-ZIP VERO BEACH, FL 32967 INTE DST SIREET ADDRESS GITY-ST-ZIP VERO BEACH, FL 32967 INTE DAT SIREET ADDRESS GITY-ST-ZIP VERO BEACH, FL 32967 INTE NAME SIREET ADDRESS GITY-ST-ZIP VERO BEACH, FL 32967 INTE NAME SIREET ADDRESS GITY-ST-ZIP VERO BEACH, FL 32967 INTE NAME SIREET ADDRESS GITY-ST-ZIP VERO BEACH, FL 32967 INTE NAME SIREET ADDRESS GITY-ST-ZIP VERO BEACH, FL 32967 INTE NAME SIREET ADDRESS GITY-ST-ZIP VERO BEACH, FL 32967 INTE NAME SIREET ADDRESS GITY-ST-ZIP INTE SIREET AD		Due by M	lay 1, 2007	Trust Fund	Contribution.		Added to Fees	Flori	da Departr	nent of S	tate
INTE DP MAKE NORTH, ANNABEL SIREET ADDRESS CITY-ST-ZIP NAME SIREET ADDRESS CITY-ST-ZIP NAME SPEECHLY, CLIFFORD S JR SIREET ADDRESS CITY-ST-ZIP SIREET ADDRES	UTLE	Due by M	OFFICERS AND DI	Trust Fund	Contribution. 11. TITLE	DV	Added to Fees	Flori GES TO OFFICER	da Departi	ment of S	tate ₹ 10
SIRET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32967 TITLE DST NAME BAYER, BENNETT STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32967 TITLE NAME SPEECHLY, CLIFFORD S JR STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32967 TITLE NAME SPEECHLY, CLIFFORD S JR STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32967 TITLE NAME SPEECHLY, CLIFFORD S JR STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS	DV REESE, A 4380 US H	OFFICERS AND DI UKAN HIGHWAY, #1	Trust Fund	TITLE NAME STREET ADDRESS	DV SI	Added to Fees ADDITIONS/CHANG TER, CA	Flori GES TO OFFICEF TRI Hwy#1	da Departi	ment of Si	tate ₹ 10 Addition
ITTLE DST Delote	NAME STREET ADDRESS CITY-ST-ZIP	DV REESE, A 4380 US H VERO BE	OFFICERS AND DI KAN HIGHWAY, #1 ACH, FL 32967	Trust Fund RECTORS Delete	Contribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SIN VE	Added to Fees ADDITIONS/CHANG ATER, CA BO U.S. RO BEA	Flori GES TO OFFICEF TR 1 Hwy#1 ACH F	da Departi	ment of Sincoron Change	tate ₹ 10 Addition
STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32967 TITLE M SPEECHLY, CLIFFORD S JR STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32967 TITLE NAME STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32967 TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE HAME STREET ADDRESS	DV REESE, A 4380 US H VERO BE. DP NORTH, A 4380 US H	OFFICERS AND DI KAN HIGHWAY, # 1 ACH, FL 32967 ANNABEL HIGHWAY, # 1	Trust Fund RECTORS Delete	CONTribution. 11. 11/LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DV SIN VE DS ES	Added to Fees ADDITIONS/CHANG ATER, CA BO U.S. RO BEA T TES JA	Flori GES TO OFFICEF TRI Hwy#1 ACH F	da Departi	ment of Sincoron Change	tate ₹ 10 Addition
CITY-ST-ZIP VERO BEACH, FL 32967 CITY-ST-ZIP CHANGE ITILE IT	ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE	DUE by M DV REESE, A 4380 US H VERO BE DP NORTH, A 4380 US H VERO BE DST	OFFICERS AND DI KAN HIGHWAY, # 1 ACH, FL 32967 NNABEL HIGHWAY, # 1 ACH, FL 32967	Trust Fund RECTORS Delete	Contribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DV SIN VE DS ES 43 VE DP	Added to Fees ADDITIONS/CHANG ATER, CA BO U.S. ROBE T TES JA BO U.S. ROBE TES JA BO U.S.	Flori GES TO OFFICEF Hay # 1 ACH F MES Hay # EACH F	da Departi	ment of Sincoron Change	Addition Addition
THE NAME SPEECHLY, CLIFFORD S JR 4380 US HIGHWAY, # 1 VERO BEACH, FL 32967 THLE HAME STREET ADDRESS CITY-ST-ZIP THLE HAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP	ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME	DUE by M DV REESE, A 4380 US H VERO BE. DP NORTH, A 4380 US H VERO BE. DST BAYER, B	OFFICERS AND DI KAN HIGHWAY, # 1 ACH, FL 32967 ANNABEL HIGHWAY, # 1 ACH, FL 32967 BENNETT	Trust Fund RECTORS Delete	CONTribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DV SI VE DS ES VE DP BAY	Added to Fees ADDITIONS/CHANG ATER, CA BO U.S. ROBEA TES JA BO U.S. ROBEA BO U.S. BO U.S.	Flori GES TO OFFICEF TRI Hay # 1 ACH F MES Hay # EACH F	da Departi	ment of Sincoron Change	Addition Addition
CITY-ST-ZIP VERO BEACH, FL 32967 CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CHANGE CITY-ST-ZIP	ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS	DUE by M DV REESE, A 4380 US H VERO BE DP NORTH, A 4380 US H VERO BE DST BAYER, B 4380 US H	OFFICERS AND DI KAN HIGHWAY, # 1 ACH, FL 32967 ANNABEL HIGHWAY, # 1 ACH, FL 32967 BENNETT HIGHWAY, # 1	Trust Fund RECTORS Delete	CONTribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	DV SI VE DS VE DP BAY BAY BAY	Added to Fees ADDITIONS/CHANG ATER, CA BO U.S. TO BE TO JA BO U.S. BO BE BO U.S. BO BE RO BE AND BO U.S. BO J.S. BO J.S. BO J.S. BO J.S. BO J.S.	Flori GES TO OFFICEF HWY # ACH F MES HWY # EACH F	da Departr	nent of Si ECTORS IN Change Change Change Change	Addition Addition Addition
ITILE HAME STREET ADDRESS CITY-S1-ZIP Delete TITLE Change Addition NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP CHANGE	ITLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE HAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DUE by M DV REESE, A 4380 US H VERO BE DP NORTH, A 4380 US H VERO BE DST BAYER, B 4380 US H VERO BE M	OFFICERS AND DI KAN HIGHWAY, # 1 ACH, FL 32967 ANNABEL HIGHWAY, # 1 ACH, FL 32967 BENNETT HIGHWAY, # 1 ACH, FL 32967	Trust Fund RECTORS Delete Delete	CONTribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	DV SI VE DS VE DP BAY BAY BAY	Added to Fees ADDITIONS/CHANG ATER, CA BO U.S. TO BE TO JA BO U.S. BO BE BO U.S. BO BE RO BE AND BO U.S. BO J.S. BO J.S. BO J.S. BO J.S. BO J.S.	Flori GES TO OFFICEF HWY # ACH F MES HWY # EACH F	da Departir	nent of Si ECTORS IN Change Change Change Change	Addition Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE HAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DUE by M DV REESE, A 4380 US H VERO BE DP NORTH, A 4380 US H VERO BE DST BAYER, B 4380 US H VERO BE M SPEECHL 4380 US H	OFFICERS AND DI KAN HIGHWAY, # 1 ACH, FL 32967 ANNABEL HIGHWAY, # 1 ACH, FL 32967 BENNETT HIGHWAY, # 1 ACH, FL 32967 LY, CLIFFORD S JR HIGHWAY, # 1	Trust Fund RECTORS Delete Delete	CONTribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DV SIN VE DS H3 VE DP BAY VE	Added to Fees ADDITIONS/CHANG ATER, CA BO U.S. TO BE TO JA BO U.S. BO BE BO U.S. BO BE RO BE AND BO U.S. BO J.S. BO J.S. BO J.S. BO J.S. BO J.S.	Flori GES TO OFFICEF HWY # ACH F MES HWY # EACH F	da Departir	nent of Si ECTORS IN Change Change Change Change	Addition Addition Addition Addition
	ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE HAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE HAME STREET ADDRESS	DUE by M DV REESE, A 4380 US H VERO BE DP NORTH, A 4380 US H VERO BE DST BAYER, B 4380 US H VERO BE M SPEECHL 4380 US H	OFFICERS AND DI KAN HIGHWAY, # 1 ACH, FL 32967 ANNABEL HIGHWAY, # 1 ACH, FL 32967 BENNETT HIGHWAY, # 1 ACH, FL 32967 LY, CLIFFORD S JR HIGHWAY, # 1	Trust Fund RECTORS Delete Delete	CONTribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DV SIN VE DS H31 VE DP BAY VE	Added to Fees ADDITIONS/CHANG ATER, CA BO U.S. TO BE TO JA BO U.S. BO BE BO U.S. BO BE RO BE AND BO U.S. BO J.S. BO J.S. BO J.S. BO J.S. BO J.S.	Flori GES TO OFFICEF HWY # ACH F MES HWY # EACH F	da Departr	nent of Si ECTORS IN Change Change Change Change Change Change	Addition Addition Addition Addition Addition

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 with an address, with all other like empowered.