2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Aug 08, 2008 8:00 am Secretary of State

| 1. Entity Nam ARMEEN | MENT # N0300000 EXECUTIVE CENTER CO ATION, INC. | | | 0 | 8-08-2008 | 90015 034 ****6 | 1.25 | |
|---|---|-------------------------------------|--|---|--|--|------------------------------|--|
| Principal Plac | e of Business | Mailing Address | | | | | | |
| 1029 S NOVA RD Unit h | | 1515 RIDGE WOOD AVE | | | | | | |
| ORMOND BEACH, FL 32174 | | HOLLY HILL, FL 32117 | | | | | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 07212008 Ch | ng-NP | CR2E037 (12/06) | | |
| City & State | | City & State | | 4. FEI Number 20-209562 | 3 | <u> </u> | pplied For ot Applicable | |
| Zip | Country | Zip | Country | 5. Certificate of Sta | atus Desired | □ \$8.75 Ad Fee Require | | |
| | 6. Name and Address of Curren | t Registered Agent | Name | 7. Name and Add | ress of New F | Registered Agent | | |
| LOGUIDIO | LOGUIDICE, JOE | | | | | | | |
| 1515 RIDGE WOOD AVE HOLLY HILL, FL 32117 | | | Street Add | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| HOLLITA | CL, 1 C 32111. | | | | · | | | |
| • • • • • • • • • • • • • • • • • • • | | City | | | | FL Zip Coo | | |
| | named entity submits this statement tions of registered agent. | of the purpose of changing its r | egistered office or re | egistered agent, or both/in | the State of FI | orida. I am familiar with | , and accept | |
| inc obliga | sons or regionarou again. | | | 9/10 | y/y (| | | |
| SIGNATURE | //- | - | | ///8 | /00 | | | |
| | | | | | | | | |
| | Signature, typed or printed name of registered age | nt and fittle if applicable. (NOTE: | Registered Agent signature | required when reinstang) | , | DATE | | |
| D | Filling Fee Is \$61.25 ue by September 12, 2008 | 9. Election Cam Trust Fund Co | paign Financing | \$5.00 May Be | | PATE Alake check payable frida Department of S | | |
| 10. | Filing Fee is \$61.25 | 9. Election Cam Trust Fund Ca | paign Financing ontribution. | \$5.00 May Be Added to Fees | Flo | fake check payable t | State | |
| 10. | Filing Fee Is \$61.25 oue by September 12, 2008 OFFICERS AND D | 9. Election Cam Trust Fund Ca | paign Financing ontribution. | \$5.00 May Be Added to Fees ADDITIONS/CHANGE | Floor ES TO OFFICE | Aake check payable in rida Department of S | State | |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 with an address, with all other like empowered.

386-316-9519