2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006225

FILED Feb 24, 2004 Secretary of State

Entity Name: COUNTRY CLUB ESTATES COMMUNITY ASSOCIATION OF TITUSVILLE, INC.

Current Principal Place of Business: New Principal Place of Business:

575 S. WICKHAM ROAD 2000 NORTH TROPICAL TRAIL

WEST MELBOURNE, FL 32904 MERRITT, FL 32953

Current Mailing Address: New Mailing Address:

575 S. WICKHAM ROAD 779 E. MERRITT ISLAND CSWY PMB 753

WEST MELBOURNE, FL 32904 MERRITT ISLAND, FL 32953

FEI Number: 20-0263525 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:

CLARK, COY A HAFIZI, DAVID

575 S. WICKHAM ROAD 2000 NORTH TROPICAL TRAIL WEST MELBOURNE, FL 32904 MERRITT ISLAND, FL 32953

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: DAVID HAFIZI 02/24/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P (X) Change () Addition Name: CLARK, COY A Name: HAFIZI, HAMID

Address: 575 S. WICKHAM ROAD Address: 2000 NORTH TROPICAL TRAIL
City-St-Zip: WEST MELBOURNE, FL 32904 City-St-Zip: MERRITT ISLAND, FL 32953

Title: SD Title: (X) Change () Addition () Delete BLACKSTONE, JEFFREY Name: VILLANUEVA-HAFIZI, JERRI A Name: Address: 575 S. WICKHAM ROAD Address: 2000 NORTH TROPICAL TRAIL City-St-Zip: WEST MELBOURNE, FL 32904 City-St-Zip: MERRITT ISLAND, FL 32953

Name: STARNES, SONJA Name: HAFIZI, DAVID

Address: 575 S. WICKHAM ROAD Address: 2000 NORTH TROPICAL TRAIL
City-St-Zip: WEST MELBOURNE, FL 32904 City-St-Zip: MERRITT ISLAND, FL 32953

Title: () Delete Title: VP () Change (X) Addition

Name: Name: HAFIZI, MARYAM

Address: Address: 2000 NORTH TROPICAL TRAIL City-St-Zip: City-St-Zip: MERRITT ISLAND, FL 32953

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: JERRI A. VILLANUEVA-HAFIZI VP 02/24/2004