2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State
05-03-2004 91002 048 ****61.25

DOCUMENT # N03000007501

1. Entity Name
DANIEL'S LANDING ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3300 UNIVERSITY DR CORAL SPRINGS, FL 33065	3300 UNIVERSITY DR CORAL SPRINGS, FL 33065

04262004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
5695 Beggs Road	5695 Beggs Road
Suite, Apt. #, etc.: Suite B-100	Suite, Apt. #, etc.: Suite B-100
City & State: Orlando, Florida	City & State: Orlando, Florida
Zip: 32810 Country: USA	Zip: 32810 Country: USA

4. FEI Number 57-1184925 ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SIMON, ERIC A
2825 UNIVERSITY DR STE 300
CORAL SPRINGS, FL 33065

7. Name and Address of New Registered Agent

Name: Sutherland, Theresa D.
Street Address (P.O. Box Number is Not Acceptable): 5695 Beggs Road
Suite B-100
City: Orlando FL Zip Code: 32810

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Theresa D. Sutherland DATE: 4/28/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ANDREACCI, DAN 3300 UNIVERSITY DR CORAL SPRINGS, FL 33065	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Greco, Richard 6355 metro West Blvd, Suite 260 Orlando, FL 32835	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV KLEISLEY, RICHARD 3300 UNIVERSITY DR CORAL SPRINGS, FL 33065	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Fanning, Richard 6355 Metro West Blvd., Suite 260 Orlando, FL 32835	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVST DIFIORE, CORA 3300 UNIVERSITY DR CORAL SPRINGS, FL 33065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Di Fiore, Cora 6355 Metro West Blvd., Suite 260 Orlando, FL 32835	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE: Richard Greco Richard Greco 04/28/04 407-291-1112
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #