2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004851

FILED Apr 29, 2005 Secretary of State

Entity Name: OAKVIEW ESTATES OF DAYTONA, INC.

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

185 CYPRESS POINT PARKWAY PALM COAST, FL 32164

Current Mailing Address: New Mailing Address:

185 CYPRESS POINT PARKWAY PALM COAST, FL 32164

FEI Number: 20-0740082 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:

SAWDAI, MIKE

185 CYPRESS POINT PARKWAY
PALM COAST, FL 32164 US

GAZZOLI, LAURA
185 CYPRESS POINT PARKWAY
SUITE 700
PALM COAST, FL 32164 US

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

in the State of Florida.

SIGNATURE: LAURA GAZZOLI 04/29/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: P (X) Change () Addition

Name: SAWDAI, MIKE Name: SAWDAI, MICHAEL

Address: 185 CYPRESS POINT PARKWAY Address: 185 CYPRESS POINT PARKWAY, SUITE 700

City-St-Zip: PALM COAST, FL 32164 City-St-Zip: PALM COAST, FL 32164

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

 Name:
 MENTZER, MICHEL
 Name:

 Address:
 185 CYPRESS POINT PARKWAY
 Address:

 City-St-Zip:
 PALM COAST, FL 32164
 City-St-Zip:

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

 Name:
 GAZZOLI, ROBERT
 Name:

 Address:
 185 CYPRESS POINT PARKWAY
 Address:

 City-St-Zip:
 PALM COAST, FL 32164
 City-St-Zip:

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: MICHAEL SAWDAI P 04/29/2005