FILED Apr 10, 2006 8:00 am Secretary of State

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT 04-10-2006 90306 018 ****61.25 DOCUMENT # N08718 1. Entity Name SUMMER BREEZE OWNERS ASSOCIATION, INC.

60024603 Principal Place of Business Mailing Address 12815 HWY 98 WEST P 0 BOX 1779 DESTIN, FL 32540 US SUITE 100 DESTIN, FL 32550 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02072006 Chg-NP CR2E037 (11/05) Applied For City & State City & State 4. FEI Number 59-2760721 Not Applicable Miramar Beach, Fl Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SMITH, LORETTA W 12815 HIGHWAY 98 WEST, STE. 100 Street Address (P.O. Box Number is Not Acceptable) DESTIN, FL 32541 City Zip Code 32550 Miramar Beach 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make check payable to Filing Fee is \$61.25 Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Defete TITI E ☐ Change ☐ Addition BURCH, BRIAN NAME NAME 20 HARWOOD ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP WEST SENICA, NY 14224 CITY-ST-ZIP ☐ Delete TITLE **□** Change ■ Addition TITLE JOHNSON, ERIC NAME NAME 7402 Hampton Oaks Dr. 1461 LENOX COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WHEELING, IL 60090 Portage MI 49024 Addition Delete TITLE ☐ Change TITLE DESALVO, MARK NAME Polterak, Dennis NAME 3120 Hartford Court P.O BOX 83 STREET ADDRESS STREET ADDRESS DESTIN, FL 32540 CITY-ST-ZIP CITY-S1-ZIP acchester Hills, MI 48306 Delete TITLE Change ☐ Addition TITLE NAME SHEHAN, BECKY MURPHY NAME 1975 mifield Circle STREET ADDRESS 1260 CASTLE POINT LANE STREET ADDRESS CITY-ST-ZIP GRAYSON, GA 30017 CITY-ST-ZIP Shellville, GA 30078 ☐ Change Addition ☐ Delete TITLE TITLE ATKINS, CHET NAME NAME STREET ADDRESS STREET ADDRESS 30 LAKE COWETA TRAIL CITY-ST-ZIP CITY-ST-ZIP NEWNAN, GA 30263 ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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.

OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR