2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2005
Secretary of State

DOCUMENT# N10465

Entity Name: MYERLEE MANOR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1499 BRANDYWINE CIRCLE
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

1499 BRANDYWINE CIRCLE
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 59-2787792 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOWORYTA, HENRY J
1499 BRANDYWINE CIR
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BENEFIELD, BARBARA J
Address: 1499 BRANDYWINE CIRCLE STE 212
City-St-Zip: FORT MYERS, FL

Title: D ( ) Delete
Name: WHITLEY, EVA M
Address: 1499 BRANDYWINE CIR. #217
City-St-Zip: FORT MYERS, FL 33919

Title: D ( ) Delete
Name: HUVAERE, KATHRYN J
Address: 1499 BRANDYWINE CIR., #309
City-St-Zip: FT. MYERS, FL

Title: D ( ) Delete
Name: TUCKER, LILLIAN E
Address: 1499 BRANDYWINE CIR. #445
City-St-Zip: FORT MYERS, FL 33919

Title: D ( ) Delete
Name: HAASE, LESTER
Address: 1499 BRANDYWINE CIR #346
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: JOHANSEN, FLORENCE M
Address: 1499 BRANDYWINE CIR., #205
City-St-Zip: FT. MYERS, FL 33919

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: BARBARA J BENEFIELD D 02/15/2005

Electronic Signature of Signing Officer or Director — Date