## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N14971

FILED Apr 29, 2005 Secretary of State

| April  |   |                                |                                |                         |   |                           |          |  |
|--|---|--------------------------------|--------------------------------|-------------------------|---|---------------------------|----------|--|
| C/O SUNBURST MGMT. PO BOX 110339 NAPLES, FL 34112  Current Mailing Address:  C/O SUNBURST MGMT. PO BOX 110339 NAPLES, FL 34112  New Mailing Address:  Name Company Marco Island, FL 34146  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  Name: Name: O4/29/2005  Electronic Signature of Registered Agent  Name: Address: O4/29/2005  Date  OFFICERS AND DIRECTORS:  Title: DP ( ) Delete  Name: Address: O7/20 HAIDEMAN CREEK DRIVE  Name: Address: O7/20 HAIDEMAN CREEK DRIVE  Name: Name: Nacheles, FL 34112  City-St-Zip: Naples, FL 34112  City-St-Zip: Naples, FL 34112  Title: DST ( ) Delete  Title: ( ) Change ( ) Addition  Name: Address: O7/20 HAIDEMAN CREEK DRIVE  Title: DST ( ) Delete  Title: ( ) Change ( ) Addition  Name: Address: O7/20 HAIDEMAN CREEK DRIVE  Name: BONADIES, BRUCE  Name: BONADIES, BRUCE  Address: O7/20 HAIDEMAN DR.  Address: O7/20 HAIDEMAN DR.  | Entity Nai                                    | me: NORTHS                     | TAR CONDOMINIUM ASSOC          | IATION, INC.            |   |                           |          |  |
| NAPLES, FL 34108  Current Mailing Address:  New Mailing Address Selected Use  Name:  New Registered Agent:  Name: Address:  New A | Current Principal Place of Business:          |                                |                                | New Princi              | New Principal Place of Business:          |                           |          |  |
| C/O SUNBURST MGMT. PO BOX 110339 NAPLES, FL 34108  FEI Number: 59-2771453 FEI Number Applied For ( )  Name and Address of Current Registered Agent:  KUETER, BEVERLY C/O SUNBURST MGMT. 3267 N. COLLIER BLVD. 35TE #201 MARCO ISLAND, FL 34145 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.  SIGNATURE: TOM PATAS  CIPCTOR SIDENTIAN  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: DP ( ) Delete Name: CARR, DAN Address: City-St-Zip: NAPLES, FL 34112  City-St-Zip: NAPLES, FL 341112  City-St-Zip: NAPLES, FL 34112  City-St-Zip: NAPLES, FL 3411 | PO BOX 1                                      | 10339                          |                                |                         |   |                           |          |  |
| MARCO ISLAND, FL 34146 US  Marco Island, FEI Number Not Applicable ( ) Certificate of Status Desired ( )  Marco Island, FL 34146 US  Marco Island, FL 34146 US  Marco Island, FL 34146 US  Marco Island, FL 34145 US  Marco Island, FL 34145 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.  SIGNATURE: TOM PATAS   | Current M                                     | lailing Addres                 | s:                             | New Mailin              | New Mailing Address:                      |                           |          |  |
| Name and Address of Current Registered Agent:  KUETER, BEVERLY C/O SUNBURST MGMT. 4267 N. COLLIER BLVD. STE #201 NAPLES, FL 34104 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.  SIGNATURE: TOM PATAS Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: DP () Delete Name: CARR, DAN Address: 3722 HALDEMAN CREEK DR NAPLES, FL 34112  Title: DVP () Delete Name: MACPHERSON, BRUCE Address: 3702 HALDEMAN CREEK DRIVE City-St-Zip: NAPLES, FL 34112  Title: DST () Delete Name: BONADIES, BRUCE Address: 3700 HALDEMAN CREEK Address: 3700 HALDEMAN CREEK ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: () Change () Addition Name: Address: () Change () Addition Name: Address: () City-St-Zip: () Change () Addition Name: Address: () Change () Addition Name: () Change ()  | PO BOX 1                                      | 10339                          |                                |                         |   | US                        |          |  |
| KUETER, BEVERLY C/O SUNBURST MGMT. 4306 ARNOLD AVE. NAPLES, FL 34104 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.  SIGNATURE: TOM PATAS 04/29/2005 Electronic Signature of Registered Agent Date  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: DP () Delete Name: CARR, DAN Address: 3722 HALDEMAN CREEK DR City-St-Zip: NAPLES, FL 34112  Title: DVP () Delete Name: MACPHERSON, BRUCE Address: 3702 HALDEMAN CREEK DRIVE City-St-Zip: NAPLES, FL 34112  Title: DVP () Delete Name: MACPHERSON, BRUCE Address: 3702 HALDEMAN CREEK DRIVE City-St-Zip: NAPLES, FL 34112  Title: DST () Delete Name: MACPHERSON, BRUCE Address: 3700 HALDEMAN CREEK DRIVE City-St-Zip: NAPLES, FL 34112  Title: DST () Delete Name: BONADIES, BRUCE Address: 3700 HAIDEMAN DR.  Address: 3700 HAIDEMAN DR.  Address: 3700 HAIDEMAN DR.  Address: Address: Address: Address: 3700 HAIDEMAN DR.  Address: Address: Address: Address: 3700 HAIDEMAN DR.  Address: Address: Address:   | FEI Number                                    | : 59-2771453                   | FEI Number Applied For ( )     | FEI Number Not Applic   | able ( ) Cert                             | tificate of Status Desire | ed ( )   |  |
| C/O SUNBURST MGMT. 4306 ARNOLD AVE. NAPLES, FL 34104 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.  SIGNATURE: TOM PATAS  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: DP () Delete Name: CARR, DAN Address: 3722 HALDEMAN CREEK DR Address: 3722 HALDEMAN CREEK DR City-St-Zip: NAPLES, FL 34112  City-St-Zip: NAPLES, FL 34112  Title: DVP () Delete Name: MACPHERSON, BRUCE Address: 3702 HALDEMAN CREEK DRIVE City-St-Zip: NAPLES, FL 34112  Title: DST () Delete Name: MACPHERSON, BRUCE Address: 3702 HALDEMAN CREEK DRIVE City-St-Zip: NAPLES, FL 34112  Title: DST () Delete Name: BONADIES, BRUCE Address: 3700 HAIDEMAN DR.  Name: BONADIES, BRUCE Address: 3700 HAIDEMAN DR.  Address: 3700 HAIDEMAN DR.  Address: Address:   | Name and Address of Current Registered Agent: |                                |                                | Name and A              | Name and Address of New Registered Agent: |                           |          |  |
| in the State of Florida.  SIGNATURE: TOM PATAS   | C/O SUNE<br>4306 ARN                          | BURST MGMT.<br>OLD AVE.        |                                | 267 N. COLI<br>STE #201 | 267 N. COLLIER BLVD.<br>STE #201          |                           |          |  |
| Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: DP ( ) Delete Title: ( ) Change ( ) Addition Name: CARR, DAN Address: 3722 HALDEMAN CREEK DR City-St-Zip: NAPLES, FL 34112  City-St-Zip: NAPLES, FL 34112  Title: DVP ( ) Delete Title: ( ) Change ( ) Addition Name: MACPHERSON, BRUCE Name: MACPHERSON, BRUCE Name: Address: City-St-Zip: NAPLES, FL 34112  City-St-Zip: NAPLES, FL 34112  Title: DST ( ) Delete Title: ( ) Change ( ) Addition Name: BONADIES, BRUCE Name: Address: 3700 HAIDEMAN DR.  Title: DST ( ) Delete Name: Address: Address: 3700 HAIDEMAN DR.  |   |                                | submits this statement for the | ourpose of changing its | registered office                         | or registered agent,      | or both, |  |
| OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: DP ( ) Delete Name: CARR, DAN Address: 3722 HALDEMAN CREEK DR Address: NAPLES, FL 34112  Title: DVP ( ) Delete Name: MACPHERSON, BRUCE Address: 3702 HALDEMAN CREEK DRIVE City-St-Zip: NAPLES, FL 34112  Title: DVP ( ) Delete Title: Oity-St-Zip: Name: MACPHERSON, BRUCE Address: 3702 HALDEMAN CREEK DRIVE City-St-Zip: NAPLES, FL 34112  Title: DST ( ) Delete Name: BONADIES, BRUCE Address: 3700 HAIDEMAN DR.  Title: DST ( ) Delete Name: BONADIES, BRUCE Address: 3700 HAIDEMAN DR.  Address: 3700 HAIDEMAN DR.  Address: 3700 HAIDEMAN DR.  | SIGNATUI                                      | RE: TOM PAT                    | AS                             |                         |   | 04/29/2005                |          |  |
| Title: DP ( ) Delete Title: ( ) Change ( ) Addition Name: CARR, DAN Name: Address: 3722 HALDEMAN CREEK DR Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip:  Title: DVP ( ) Delete Title: ( ) Change ( ) Addition Name: MACPHERSON, BRUCE Name: Address: 3702 HALDEMAN CREEK DRIVE Address: 3702 HALDEMAN CREEK DRIVE Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip:  Title: DST ( ) Delete Title: ( ) Change ( ) Addition Name: Address: 3700 HAIDEMAN DR.   |   | Electron                       | ic Signature of Registered Ag  | ent                     |   | Date                      |          |  |
| Name: CARR, DAN Name: Address: 3722 HALDEMAN CREEK DR Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip:  Title: DVP () Delete Name: MACPHERSON, BRUCE Address: City-St-Zip: VAPLES, FL 34112 City-St-Zip:  Title: DST () Delete Title: () Change () Addition Name: Address: City-St-Zip: VAPLES, FL 34112 City-S | OFFICER                                       | S AND DIREC                    | TORS:                          | ADDITIONS               | S/CHANGES TO                              | OFFICERS AND DI           | RECTORS: |  |
| Name: MACPHERSON, BRUCE Name: Address: 3702 HALDEMAN CREEK DRIVE Address: City-St-Zip: NAPLES, FL 34112 City-St-Zip:  Title: DST () Delete Title: () Change () Addition Name: BONADIES, BRUCE Name: Address: 3700 HAIDEMAN DR. Address:  | Title:<br>Name:<br>Address:<br>City-St-Zip:   | CARR, DAN<br>3722 HALDEMA      | N CREEK DR                     | Name:<br>Address:       | ()Chan                                    | nge ( ) Addition          |          |  |
| Name: BONADIES, BRUCE Name: Address: Address:  | Title:<br>Name:<br>Address:<br>City-St-Zip:   | MACPHERSON<br>3702 HALDEMA     | , BRUCE<br>N CREEK DRIVE       | Name:<br>Address:       | ()Chan                                    | nge ( ) Addition          |          |  |
|  | Title:<br>Name:<br>Address:<br>City-St-Zip:   | BONADIES, BRI<br>3700 HAIDEMAI | UCE                            | Name:<br>Address:       | ()Chan                                    | nge ( ) Addition          |          |  |

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: DAN CARR DP 04/29/2005