2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N15313

Entity Name: THE LODGES OF SOUTH CONGRESS AVENUE, INC.

Current Principal Place of Business:

2135 S. CONGRESS AVE
STE 4 B
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

ASSET MGT INC
2135 SOUTH CONGRESS AVE STE4B
WEST PALM BEACH, FL 33406 US

New Mailing Address:

FEI Number: 58-1719223 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRAUB, KELLI
2135 S CONGRESS AVE
4-B
WEST PALM BEACH, FL 33406 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: VPD ( ) Delete
Name: AYALA, RICARDO
Address: 2135 S.CONGRESS AVE,#1A
City-St-Zip: PALM SPRINGS, FL 33406

Title: PD (X) Delete
Name: SAMILJAN, STEVEN T
Address: 2135 S. CONGRESS AVE., #3 CD
City-St-Zip: PALM SPRINGS, FL 33406

Title: D ( ) Delete
Name: DIAZ DE VILLAGES, HECTOR
Address: 2135 S.CONGRESS AVE,#2A
City-St-Zip: PALM SPRINGS, FL 33406

Title: D ( ) Delete
Name: RESTREPO, ALVARO
Address: 2135 S. CONGRESS AVE. 4-A
City-St-Zip: PALM SPRINGS, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 exemption stated 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 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: KELLI STRAUB RA 04/29/2008

Electronic Signature of Signing Officer or Director — Date