## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED Feb 26, 2007 8:00 am Secretary of State

Daytime Phone #

| DOCUMENT # N20340  1. Entity Name FINN'S COVE HOMEOWNERS ASSOCIATION, INC.                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                 |                  |                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                    | 02-26-2007 90056 024 ****61.25                  |                                                           |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-------------------------------------------------|-----------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--|
| Principal Place<br>498 PALM SI<br>235<br>ALTAMONTE                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                 | 498 P<br>SUITE   | lailing Address<br>198 PALM SPRINGS DR<br>JUITE 235<br>ALTAMONTE SPRINGS, FL 32701 US |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                    |                                                 | 11 <b>0</b> 44 <b>00</b> 160 4144 <b>010</b> 11 <b>00</b> |                                     | 18:1 8:111 81811 BJR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                  |  |
| 2. Principal P                                                                                                                                                                                                                                                                                                  | Place of Business - No P.O. Box #                                                                                                                                                                                                                               | 3. Mail          | ing Address                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                    |                                                 |                                                           |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                  |  |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                 |                  | Suite, Apt. #, etc.                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                    | 01042007                                        | Chg-NP                                                    | CR2E                                | 037 (12/06)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                  |  |
| City & State                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                 |                  | City & State                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                    | 4. FEI Numbe<br>59-2912                         |                                                           |                                     | <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | oplied For<br>ot Applicable                      |  |
| Zip                                                                                                                                                                                                                                                                                                             | Country                                                                                                                                                                                                                                                         | Zip              |                                                                                       | Cau                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ıntry                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                    | 5. Certificate of                               | of Status Desired                                         |                                     | \$8.75 Add                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                  |  |
|                                                                                                                                                                                                                                                                                                                 | 6. Name and Address of Current                                                                                                                                                                                                                                  | Registere        | d Agent                                                                               | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                    | 7. Name and                                     | Address of New I                                          | Registered                          | Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                  |  |
| DOVIEN                                                                                                                                                                                                                                                                                                          | ANACEMENT CERVICES                                                                                                                                                                                                                                              |                  | -                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                    |                                                 | -                                                         |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                  |  |
| BOYLE MANAGEMENT SERVICES 498 PALM SPRINGS DR., #235 ALTAMONTE SPRINGS, FL 32701                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                 |                  |                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Street Address (P.O. Box Number is Not Acceptable) |                                                 |                                                           |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                  |  |
|                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                 |                  |                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | - 6%                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                    |                                                 |                                                           |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                  |  |
|                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                 |                  |                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                    |                                                 |                                                           | FI                                  | Zip Cod                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | е                                                |  |
|                                                                                                                                                                                                                                                                                                                 | named entity submits this statement to<br>lions of registered agent.                                                                                                                                                                                            | or the purpo     | ose of changing its                                                                   | register                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ed office o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | r register                                         | ed agent, or both                               | n, in the State of Fl                                     | lorida. Lan                         | n familiar with,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | and accept                                       |  |
| SIGNATURE .                                                                                                                                                                                                                                                                                                     | Signature, typed or printed name of registered agent                                                                                                                                                                                                            | and title if app | licable (NOTI                                                                         | F. Registere                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | d Agent signat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                    | when (exceletions)                              | <del> </del>                                              | DATE                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                  |  |
|                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                 |                  |                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ure required                                       | mierremata:rig/                                 |                                                           |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                  |  |
|                                                                                                                                                                                                                                                                                                                 | <del>-</del>                                                                                                                                                                                                                                                    |                  | 9. Election Car<br>Trust Fund (                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | inancing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                    | \$5.00 May Be<br>Added to Fees                  | •                                                         | Make chec                           | ck payable to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                  |  |
| 10.                                                                                                                                                                                                                                                                                                             | <del>-</del>                                                                                                                                                                                                                                                    | RECTORS          |                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | inancing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                    | \$5.00 May Be<br>Added to Fees                  | •                                                         | Make chec                           | rtment of St                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | tate                                             |  |
| 10.<br>TITLE                                                                                                                                                                                                                                                                                                    | Due by May 1, 2007                                                                                                                                                                                                                                              | RECTORS          |                                                                                       | Contributi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | inancing<br>ion.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | rtment of St                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | tate                                             |  |
| TITLE<br>NAME                                                                                                                                                                                                                                                                                                   | OFFICERS AND DI TD NARDI, FRANK                                                                                                                                                                                                                                 | RECTORS          | Trust Fund (                                                                          | 11. TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | inancing<br>ion,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | rtment of St                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | l 10                                             |  |
| TITLE                                                                                                                                                                                                                                                                                                           | Due by May 1, 2007  OFFICERS AND DI                                                                                                                                                                                                                             | RECTORS          | Trust Fund (                                                                          | 11. HITLE NAM STRE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | inancing<br>ion.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | rtment of St                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | l 10                                             |  |
| TITLE<br>NAME<br>STREET ADDRESS                                                                                                                                                                                                                                                                                 | OFFICERS AND DI TD NARDI, FRANK 882 BROOKMEADOW CT                                                                                                                                                                                                              | RECTORS          | Trust Fund (                                                                          | 11. HITLE NAM STRE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | E<br>E<br>E<br>E<br>EET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | rtment of St                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | l 10                                             |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME                                                                                                                                                                                                                                                                | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK 882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY                                                                                                                                                   |                  | Trust Fund C                                                                          | 11. TITLE NAM STRE CITY TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | E<br>E<br>E<br>ESET ADDRESS<br>- ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | rtment of Si                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | l 10 ☐ Addition                                  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS                                                                                                                                                                                                                                                 | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK 882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY 12618 COUNTRY MEADOW CT                                                                                                                           |                  | Trust Fund C                                                                          | 11. HITLE NAM STRE CITY HITLE NAM STRE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | rtment of Si                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | l 10 ☐ Addition                                  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                                                     | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL                                                                                                            |                  | Trust Fund C                                                                          | 11. ITTLE NAM STRE CITY ITTLE NAM STRE CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | E E E E ADDRESS - ST-ZIP E E E E E E ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | IRECTORS IN  Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Addition                                         |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                                                     | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD                                                                                                        |                  | Trust Fund C                                                                          | 11. ITTLE NAM STRE CITY INITE NAM STRE CITY TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | rtment of Si                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | l 10 ☐ Addition                                  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME                                                                                                                                                                                                                          | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL                                                                                          |                  | Trust Fund C                                                                          | 11. ITTLE NAM STRE CITY ITTLE NAM STRE CITY TITLE NAM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | IRECTORS IN  Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Addition                                         |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                                                     | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD                                                                                                        |                  | Trust Fund C                                                                          | 11. ITTLE NAM STRE CITY THEE NAM STRE CITY THEE NAM STRE CITY THEE NAM STRE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | IRECTORS IN  Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | l 10 Addition   ☐ Addition                       |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS                                                                                                                                                                                                           | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR                                                                      |                  | Trust Fund C                                                                          | 11. ITTLE NAM STRE CITY THEE NAM STRE CITY THEE NAM STRE CITY THEE NAM STRE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | IRECTORS IN  Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | l 10 Addition   ☐ Addition                       |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  HITLE NAME STREET ADDRESS CITY-ST-ZIP  HITLE NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                             | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK 882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY 12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL                                                           |                  | Trust Fund C                                                                          | 11. TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | IRECTORS IN Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Addition  Addition  Addition                     |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS                                                                                                                               | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL  D  STONE, BARBARA  732 RIVERBOAT CR                    |                  | Trust Fund C                                                                          | 11. TITLE NAM STRE CITY TITLE NAM STRE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | E E E E ADDRESS - ST-ZIP E E E E E ADDRESS - ST-ZIP E E E E E ADDRESS - ST-ZIP E E E E E E ADDRESS - ST-ZIP E E E E E E ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                    | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | IRECTORS IN Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Addition  Addition  Addition                     |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME                                                                                                                                              | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL  D  STONE, BARBARA                                      |                  | Trust Fund C                                                                          | 11. TITLE NAM STRE CITY TITLE NAM STRE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | E E E E ADDRESS - ST-ZIP E E E E E E ADDRESS - ST-ZIP E E E E E ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | SID                                                | \$5.00 May Be<br>Added to Fees                  | Flo                                                       | Make chec                           | TIMENT OF SIN   Change   Chang | Addition  Addition  Addition                     |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP THE                                                                                                               | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL  D  STONE, BARBARA  732 RIVERBOAT CR                    |                  | Trust Fund C                                                                          | 11. TITLE NAM STRE CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | E E E E E E ADDRESS - ST-ZIP E E E E E E E ADDRESS - ST-ZIP E E E E E E ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SD TD                                              | \$5.00 May Be<br>Added to Fees                  | FIO OFFICE                                                | Make chec<br>rida Depa<br>ERS AND E | IRECTORS IN Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Addition  Addition  Addition                     |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                                                                             | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL  D  STONE, BARBARA  732 RIVERBOAT CR                    |                  | Trust Fund C                                                                          | 11. TITLE NAME STREE CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | E E E E ADDRESS - ST-ZIP E E E E E ADDRESS - ST-ZIP E E E E E ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | SD TD                                              | \$5.00 May Be<br>Added to Fees                  | FIO OFFICE                                                | Make chec<br>rida Depa<br>ERS AND E | TIMENT OF SIN   Change   Chang | Addition  Addition  Addition                     |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP THE                                                                                                               | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL  D  STONE, BARBARA  732 RIVERBOAT CR                    |                  | Trust Fund C                                                                          | 11. TITLE NAM STRE CITY THEE NAM STRE CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | E E E E E E ADDRESS - ST-ZIP E E E E E E E ADDRESS - ST-ZIP E E E E E E ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | SD TD KR                                           | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHA | FIO<br>INGES TO OFFICE                                    | Make chec<br>rida Depa<br>ERS AND E | TIMENT OF SIN   Change   Chang | Addition  Addition  Addition                     |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                                       | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL  D  STONE, BARBARA  732 RIVERBOAT CR                    |                  | Trust Fund C                                                                          | TITLE NAM STRE CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | SD TD KR                                           | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHA | FIO OFFICE                                                | Make chec<br>rida Depa<br>ERS AND E | Change  Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Addition  Addition  Addition                     |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS                                                   | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL  D  STONE, BARBARA  732 RIVERBOAT CR                    |                  | Trust Fund C                                                                          | 11. TITLE NAM STRE CITY THEE NAM STRE CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | E E E E ADDRESS - ST-ZIP E E E E E E ADDRESS - ST-ZIP E E E E E E ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | SD TD KR                                           | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHA | FIO<br>INGES TO OFFICE                                    | Make chec<br>rida Depa<br>ERS AND E | TIMENT OF SIN   Change   Chang | Addition  Addition  Addition                     |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL  D  STONE, BARBARA  732 RIVERBOAT CR                    |                  | Trust Fund C                                                                          | TILLE NAME STREE CITY TITLE NAME STREE CITY NAME STREE CITY NAME STREE CITY NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY NAME STREET NAME | E E E E ADDRESS - ST-ZIP E E E E E E ADDRESS - ST-ZIP E E E E E E ADDRESS - ST-ZIP E E E E E E E E E E E E E E E E E E E                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | SD TD KR                                           | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHA | FIO<br>INGES TO OFFICE                                    | Make chec<br>rida Depa<br>ERS AND E | Change  Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Addition  Addition  Addition                     |  |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL  D  STONE, BARBARA  732 RIVERBOAT CR  ORLANDO, FL 32828 | , !              | Trust Fund () Delete  Delete  Delete  Delete                                          | TILLE NAM STRE CITY TITLE NAM STRE CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | E E E ADDRESS -ST-ZIP E E E E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E | TD KR                                              | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHA | FIO OFFICE                                                | Aake checrida Depa                  | TIMENT of SI  IRECTORS IN  Change  Change  Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Addition  Addition  Addition  Addition  Addition |  |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | Due by May 1, 2007  OFFICERS AND DI  TD  NARDI, FRANK  882 BROOKMEADOW CT  ORLANDO, FL 32828  PD  TOMKO, MINDY  12618 COUNTRY MEADOW CT  ORLANDO, FL  VD  FLYNN, DARYL  -736 RIVER BOAT CR  ORLANDO, FL  D  STONE, BARBARA  732 RIVERBOAT CR                    | , !              | Trust Fund () Delete  Delete  Delete  Delete                                          | TILLE NAM STRE CITY TITLE NAM STRE CITY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | E E E ADDRESS -ST-ZIP E E E E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E | TD KR                                              | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHA | FIO OFFICE                                                | Aake checrida Depa                  | TIMENT of SI  IRECTORS IN  Change  Change  Change  Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Addition  Addition  Addition  Addition  Addition |  |

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR