2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2004
Secretary of State

DOCUMENT# N95000002961

Entity Name: SOUTHWEST FLORIDA REGIONAL DEVELOPMENT CORPORATION

Current Principal Place of Business:

4980 BAYLINE DRIVE
FOURTH FLOOR
NORTH FT MYERS, FL 33917

New Principal Place of Business:

13180 N. CLEVELAND AVENUE
SUITE 232
NORTH FT MYERS, FL 33903

Current Mailing Address:

P.O. BOX 3455
N FT MYERS, FL 33917

New Mailing Address:

13180 N. CLEVELAND AVENUE
SUITE 232
NORTH FT MYERS, FL 33903

FEI Number: 65-0592148 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WALLACE, THOMAS
4980 BAYLINE DRIVE 4TH FLOOR
FORT MYERS, FL 33917 US

Name and Address of New Registered Agent:

WALLACE, THOMAS
13180 N. CLEVELAND AVENUE
SUITE 232
NORTH FORT MYERS, FL 33903 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____ 08/31/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: STD ( ) Delete
Name: KREMSKI, JOHN
Address: 2200 SECOND ST.
City-St-Zip: FT. MYERS, FL 33901

Title: D ( ) Delete
Name: FREEMAN, JEFFREY
Address: 1800 SECOND STREET
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete
Name: CLARK, LESTER
Address: 6321 DANILES PKWY
City-St-Zip: FORT MYERS, FL 339061279

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition
Name: REGELSKI, DANIEL
Address: 12751 WESTLINKS DRIVE, BLDG 3, UNIT 7
City-St-Zip: FT. MYERS, FL 33913

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

Title: D (X) Change ( ) Addition
Name: CLARK, LESTER
Address: 6321 DANIELS PKWY
City-St-Zip: FORT MYERS, FL 339061279

Title: D ( ) Change (X) Addition
Name: CAROL, MO;NAR
Address: 1800 CORPORATE BLVD., NW
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS WALLACE PRES 08/31/2004
Electronic Signature of Signing Officer or Director — Date