2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 06, 2008 8:00 am Secretary of State 03-06-2008 90048 015 ****61.25

Principal Place of Business 57 SW MONTEREY RD 58 State City & State City & State City & State City & State Country Country Tip Country S. Certificate of Status Desired Fee Required Fee Required Fee Required T. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address of Fee Required City Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Country Country Country Country Country Country Country St. Certificate of Status Desired Fee Required Name Name Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept
City & State City & State City & State City & State Applied For Not Applicable Zip Country S. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent Name LA GRATTA, GENEVIEVE 57 SW MONTEREY ROAD STUART, FL 34994 City FL Zip Code 8. 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. I am familiar with, and accept
Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LA GRATTA, GENEVIEVE 57 SW MONTEREY ROAD STUART, FL 34994 City FL Zip Code 8. 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. I am familiar with, and accept
Zip Country Sp. Country 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LA GRATTA, GENEVIEVE 57 SW MONTEREY ROAD STUART, FL 34994 City FL Zip Code 8. 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. I am familiar with, and accept
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8. 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. I am familiar with, and accept
the obligations of registered agent.
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remstating) DATE
Filing Fee is \$61.25 Due by May 1, 2008 9. Election Campaign Financing \$5.00 May Be Added to Fees Added to Fees Make check payable to Florida Department of State
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE P NAME WOLCOTT, ROSEANN STREET ADDRESS CITY-S1-ZIP STUART, FL 34996 Delete TITLE Secretary Karraker Jane Karraker Jane STUART, FL 34996 CITY-S1-ZIP Falm City, FL 34990
TITLE VP NAME OLIVER, LINDA STREET ADDRESS 4691 SW BRANCH TERRACE CITY-ST-ZIP PALM CITY, FL 34990 TITLE President Oliver Linda STREET ADDRESS H491 SW Branch Terrace CITY-ST-ZIP PALM CITY, FL 34990 TITLE President Oliver Linda STREET ADDRESS H491 SW Branch Terrace CITY-ST-ZIP PALM CITY, FL 34990
TITLE D Delete TITLE Treasurer Change Addition NAME ROBSON, JANICE STREET ADDRESS 5282 SE FAIRWAY WEST CITY-SI-ZIP STUART, FL 34997 Delete TITLE Treasurer DRAME Wicina Genon. 4491 SW Bimin Circle North CITY-SI-ZIP Palm City, FL 34990
TITLE NAME COLEMAN, DAVE STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 COLEMAN, DAVE STREET ADDRESS CITY-ST-ZIP TITLE Vice President Coleman, Dave STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 CITY-ST-ZIP PALM CITY, FL 34990
TITLE D Delete TITLE Change Addition NAME HOLLERAN, MARTIN STREET ADDRESS 8272 SE DOUBLE TREE DRIVE STREET ADDRESS CITY-ST-ZIP HOBE SOUND, FL 33455 CITY-ST-ZIP
TITLE S Change Addition NAME SOPKO, DEBRA J
STREET ADDRESS 1762 SW CRANE CREEK CIRCLE STREET ADDRESS
CITY-S1-ZIP PALM CITY, FL 34990 CITY-S1-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information

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indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: