2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008
Secretary of State

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Entity Name: FALLING WATERS BEACH RESORT I, INC.

Current Principal Place of Business:

C/O FAMILY PROPERTY SERVICES, INC
1330 RAIL HEAD BLVD STE 4
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

C/O FAMILY PROPERTY SERVICES, INC.
1330 RAIL HEAD BLVD. STE 4
NAPLES, FL 34110 US

New Mailing Address:

FEI Number: 65-0717499 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FAMILY PROPERTY SERVICES, INC
1330 RAIL HEAD BLVD
4
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

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

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: ROMBOUGH, DAVID
Address: 6570 BCH RESORT DR # 05
City-St-Zip: NAPLES, FL 34114 US

Title: DVP ( ) Delete
Name: CARBONETTA, ROBERT
Address: 6580 BCH RESORT DR # 10
City-St-Zip: NAPLES, FL 34114 US

Title: DST ( ) Delete
Name: BUTKUS, DIANE
Address: 6580 BEACH RESORT DR, #15
City-St-Zip: NAPLES, FL 34114 US

Title: D (X) Delete
Name: EGIDIO, GERALD M
Address: 6600 BCH RESORT DR # 15
City-St-Zip: NAPLES, FL 34114 US

Title: D (X) Delete
Name: ABBOTT, GREGORY
Address: 6600 BEACH RESORT DR. # 02
City-St-Zip: NAPLES, FL 34114 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: CAMPBELL,, THOMAS
Address: 6620 BEACH RESORT DR # 09
City-St-Zip: NAPLES, FL 34114 US

Title: DVP (X) Change ( ) Addition
Name: ABBOTT, GREGORY
Address: 6600 BEACH RESORT DR # 02
City-St-Zip: NAPLES, FL 34114 US

Title: DST (X) Change ( ) Addition
Name: BUSSANICH, BARBARA
Address: 6620 BEACH RESORT DR, #07
City-St-Zip: NAPLES, FL 34114 US

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD C. SHERWOOD, JR. CAM 04/04/2008

Electronic Signature of Signing Officer or Director — Date