2004 NOT-FOR-PROFIT CORPORATION

Feb 02, 2004 8:00 am ANNUAL REPORT Secretary of State DOCUMENT # N9600003276 02-02-2004 90028 040 ****61.25 LOT 5, EXECUTIVE CIRCLE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 131 EXECUTIVE CIRCLE 131 EXECUTIVE CIRCLE 24006110 DAYTONA BEACH, FL 32114 DAYTONA BEACH, FL 32114 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01272004 Chg-NP CR2E037 (10/03) 4. FEI Number 59-3422590 City & State Applied For City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent И WESTON, FREDERICK D 131 EXECUTIVE CIRCLE DAYTONA BEACH, FL 32114 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 450 Signature, typed or printed name of registered agent and title if applicable IOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Addition TITLE Delete TITI F Change WESTON, FREDERICK D NAME NAME Roberson, William M. 131 EXECUTIVE CIRCLE STREET ADDRESS STREET ANDRESS 131 Executive Circle CITY-ST-ZIP DAYTONA BEACH, FL 32114 CITY-ST-ZIP Daytona Beach, Change ☐ Addition TITLE ☐ Delete TITLE MCLAUGHLIN, WILLIAM I NAME NAME STREET ADDRESS 131 EXECUTIVE CIRCLE STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32114 CITY-ST-ZIP STD ΠΠĖ ☐ Change ☐ Addition ☐ Delete TITLE MCLAUGHLIN, SUSAN G NAME NAME 131 EXECUTIVE CIRCLE STREET ADDRESS STREET ADDRESS DAYTONA BEACH, FL 32114 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE - -☐ Delete TITLE NAME ... NAME and by Heby in Robe STREET ADDRESS STREET ADORESS rme, reflesering CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify 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 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

Susan G. McLaughlin SIGNATURE: X