2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9700000142

Apr 27, 2007 Secretary of State

Entity Name: ANVIL-RICHARD ALLEN GARDENS, INC.

Current Principal Place of Business: New Principal Place of Business: 101 SOUTH TERRY AVENUE ORLANDO, FL 32805 **Current Mailing Address: New Mailing Address:** 101 SOUTH TERRY AVENUE ORLANDO, FL 32805 FEI Number: 59-3411351 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANSLEY, ROBERT E JR 101 SOUTH TERRY AVENUE ORLANDO, FL 32805 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition ANSLEY, ROBERT E JR. Name: Name: 101 SOUTH TERRY AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32805 City-St-Zip: Title: () Delete Title: () Change () Addition FRINCKE, ROBERT B JR Name: Name: Address: 101 SOUTH TERRY AVENUE Address: City-St-Zip: ORLANDO, FL 32805 City-St-Zip: Title: CD () Delete Title: () Change () Addition MARTIN, AIDA Name: Name: 400 W. CHURCH STREET Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: VCD () Delete Title: () Change () Addition Name: KELLY, SARAH Name: 20 N. ORANGE AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: () Delete Title: STD (X) Change () Addition RIDINGER, CRAIG RIDINGER, CRAIG Name: Name: 100 COLONIAL CENTER PARKWAY 405 DOUGLAS AVENUE Address: Address: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: MAITLAND, FL 32746 City-St-Zip: Title: () Delete Title: (X) Change () Addition MELLEN, ROBERT MELLEN, ROBERT Name: Name: Address: 255 S. ORANGE AVENUE Address: 455 S. ORANGE AVENUE ORLANDO, FL 32801 ORLANDO, FL 32801 City-St-Zip: 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: SARAH KELLY VCD 04/27/2007