2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2004
Secretary of State

DOCUMENT# N97000002229

Entity Name: EXCEL ALTERNATIVES, INC.

Current Principal Place of Business:

520 WEST LAKE MARY BLVD.
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

520 WEST LAKE MARY BLVD.
SANFORD, FL 32773

New Mailing Address:

FEI Number: 59-3383506 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GIANNONI, TIMOTHY DR
520 WEST LAKE MARY BLVD.
SUITE 300
SANFORD, FL 32773 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:	D	( ) Delete
Name:	BARKER, SANDRA DR.	
Address:	1928 HOWELL BRANCH RD	
City-St-Zip:	WINTER PARK, FL 32792	
Title:	D	( ) Delete
Name:	BASS, MIKE	
Address:	505 MAITLAND AVE SUITE 120	
City-St-Zip:	ALTAMONTE SPRINGS, FL 32701	
Title:	D	( ) Delete
Name:	MONCRIEF, RUSSELL	
Address:	250 BETSY RUN	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	P	( ) Delete
Name:	GIANNONI, TIMOTHY	
Address:	520 W. LAKE MARY BLVD. SUITE 300	
City-St-Zip:	SANFORD, FL 32773	
Title:	D	( ) Delete
Name:	HOWELL, JOHN	
Address:	200 S ORANGE AVE., STE 2600	
City-St-Zip:	ORLANDO, FL 32801	
Title:	D	( ) Delete
Name:	WINESBURGH, BEVERLY	
Address:	978 DOUGLAS AVE SUITE 100	
City-St-Zip:	ALTAMONTE SPRINGS, FL 32714	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: MIKE BASS D 07/01/2004

Electronic Signature of Signing Officer or Director — Date