2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005
Secretary of State

DOCUMENT# N97000003763

Entity Name: REMINGTON CLUB SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 59-3467017 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR
C/O SENTRY MANAGEMENT INC
2180 WET SR 434 SUITE 5000
LONGWOOD, FL 32779 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: PD ( ) Delete
Name: SUSLOWICZ, EUGENE
Address: 1199 VANDERBILT DR
City-St-Zip: EUSTIS, FL 32726

Title: VPSD ( ) Delete
Name: ALBERTSON, BRENTON
Address: 1079 VANDERBILT DR
City-St-Zip: EUSTIS, FL 32726

Title: TD ( ) Delete
Name: BREIG, MARY
Address: 929 VANDERBILT DR
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change ( ) Addition
Name: ALBERTSON, BRENTON
Address: 1079 VANDERBILT DR
City-St-Zip: EUSTIS, FL 32726

Title: STD (X) Change ( ) Addition
Name: JAMES, ANITA
Address: 867 VANDERBILT DR
City-St-Zip: EUSTIS, FL 32726

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: EUGENE SUSLOWICZ PD 03/28/2005

Electronic Signature of Signing Officer or Director — Date