2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003689

Entity Name: PARKSTONE COMMUNITY ASSOCIATION, INC.

FILED Mar 23, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1416 CONCORD STREET EAST 1600 W. COLONIAL DR. ORLANDO, FL 32803 US ORLANDO, FL 32804 US

Current Mailing Address: New Mailing Address:

P.O. BOX 531010 ORLANDO, FL 328531010 US

FEI Number: 59-3578903 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THE MELROSE CORPORATION

1416 CONCORD STREET EAST

ORLANDO, FL 32803 US

MELROSE MANAGEMENT GROUP

1600 W. COLONIAL DR

ORLANDO, FL 32803 US

ORLANDO, FL 32803 US

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: JACK B HANSON 03/23/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DVP (X) Change () Addition Name: KAISER, DAN Name: SHEELER, LAWRENCE

Address: 385 DOUGLAS AVENUE, STE. 2000 Address: 385 DOUGLAS AVENUE, STE. 2000 City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: D () Delete Title: DP (X) Change () Addition

Name: MAKRANSKY, JAMES Name: MAKRANSKY, JAMES
Address: 385 DOUGLAS AVENUE. STE. 2000 Address: 385 DOUGLAS AVENUE. STE. 2000

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: D () Delete Title: DST (X) Change () Addition

Name: STAPLETON, KIRSTEN Name: KENNEY, SHAWN

Address: 385 DOUGLAS AVENUE, STE. 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US
Address: 385 DOUGLAS AVENUE, STE. 2000
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

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: SHAWN KENNEY DS 03/23/2004