2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N99000005918

Entity Name: SUNTREE-VIERA COMMUNITY PARKS FOUNDATION, INC.

Current Principal Place of Business:

3181 GATLIN DRIVE
VIEVA, FL 32955

New Principal Place of Business:

3181 GATLIN DRIVE
VIERA, FL 32955

Current Mailing Address:

3181 GATLIN DRIVE
VIEVA, FL 32955

New Mailing Address:

3181 GATLIN DRIVE
VIERA, FL 32955

FEI Number: 59-3601686 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JAGROWSKI, JERRY
884 SPANISH WELLS DRIVE
MELBOURNE, FL 32940 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: BEASLEY, MARY ANNE
Address: 3181 GATLIN DRIVE
City-St-Zip: VIEVA, FL 32955

Title: VD ( ) Delete
Name: JAGROWSKI, JERRY
Address: 884 SPANISH WELLS DRIVE
City-St-Zip: MELBOURNE, FL 32940

Title: SD ( ) Delete
Name: MALONE, MICHAEL
Address: P.O. BOX 140766
City-St-Zip: MELBOURNE, FL 32940

Title: TD ( ) Delete
Name: BALL, BOB
Address: 1767 INDEPENDENCE AVE
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BEASLEY, MARY ANNE
Address: 3181 GATLIN DRIVE
City-St-Zip: VIERA, FL 32955

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 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: MARY ANNE BEASLEY PD 04/13/2009

Electronic Signature of Signing Officer or Director — Date