2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004
Secretary of State

DOCUMENT# N99000006425

Entity Name: INFORMED RESIDENTS OF SUNSHINE RANCHES, INC.

Current Principal Place of Business:

4919 SW 148TH AVE
DAVIE, FL 33330

New Principal Place of Business:

Current Mailing Address:

4919 SW 148TH AVE
DAVIE, FL 33330

New Mailing Address:

FEI Number: 65-1134000 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LAMBERTUS, ARTHUR W
LAMBERTUS & LAMBERTUS, P.A.
2929 E COMMERCIAL BLVD, SUITE 604
FT LAUDERDALE, FL 33308 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: LETTERESE, PETER
Address: 5000 SW 148TH AVE
City-St-Zip: FT LAUDERDALE, FL 33330

Title: D ( ) Delete
Name: FAWCETT, BARBARA
Address: 5100 SW 148TH AVE
City-St-Zip: FT LAUDERDALE, FL 33330

Title: D ( ) Delete
Name: LETTERESE, RAMONA
Address: 5000 SW 148TH AVE
City-St-Zip: FT LAUDERDALE, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LETTERESE, PETER
Address: 5000 SW 148TH AVE
City-St-Zip: FT LAUDERDALE, FL 33330

Title: STD (X) Change ( ) Addition
Name: FAWCETT, BARBARA
Address: 5100 SW 148TH AVE
City-St-Zip: FT LAUDERDALE, FL 33330

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: BARBARA FAWCETT SEC 04/22/2004

Electronic Signature of Signing Officer or Director — Date