2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004
Secretary of State

DOCUMENT# P03000157047

Entity Name: THE TERRACES AT PARADISE LAKES, INC.

Current Principal Place of Business:

4210 W SPRUCE ST SUITE 202
TAMPA, FL 336074161

New Principal Place of Business:

4210 W SPRUCE ST
STE 202
TAMPA, FL 336074161 US

Current Mailing Address:

4210 W SPRUCE ST SUITE 202
TAMPA, FL 336074161

New Mailing Address:

4210 W SPRUCE ST
STE 202
TAMPA, FL 336074161 US

FEI Number: 90-0154098 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALLEN, LEROY R
4210 W SPRUCE ST SUITE 202
TAMPA, FL 336074161

Name and Address of New Registered Agent:

ALLEN, LEROY R
4210 W SPRUCE ST
STE 202
TAMPA, FL 336074161 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: _____ 04/22/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STEFAN, TIMOTHY
Address: 4210 W SPRUCE ST SUITE 202
City-St-Zip: TAMPA, FL 336074161

Title: D ( ) Delete
Name: WALSH, PATRICK
Address: 4210 W SPRUCE ST SUITE 202
City-St-Zip: TAMPA, FL 336074161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: STEFAN, TIMOTHY
Address: 4210 W SPRUCE ST SUITE 202
City-St-Zip: TAMPA, FL 336074161 US

Title: D (X) Change ( ) Addition
Name: WALSH, PATRICK
Address: 4210 W SPRUCE ST SUITE 202
City-St-Zip: TAMPA, FL 336074161 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY STEFAN D 04/22/2004
Electronic Signature of Signing Officer or Director — Date