2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# P04000114607

Entity Name: SANTEE VENTURES, INC.

Current Principal Place of Business:

4415 METRO PKWY STE 325
FT MYERS, FL 33916

New Principal Place of Business:

1642 MEDICAL LANE
SUITE A
FT MYERS, FL 33907

Current Mailing Address:

P.O. BOX 60259
FT MYERS, FL 33906

New Mailing Address:

1642 MEDICAL LANE
SUITE A
FT MYERS, FL 33907

FEI Number: 20-1472893 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ADAMS, HAL
4415 METRO PKWY STE 325
FT MYERS, FL 33916 US

Name and Address of New Registered Agent:

ADAMS, HAL
1642 MEDICAL LANE
SUITE A
FT MYERS, FL 33907 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: 04/29/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ADAMS, HAL
Address: 4415 METRO PKWY STE 325
City-St-Zip: FT MYERS, FL 33916

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ADAMS, HAL
Address: 1642 MEDICAL LANE, SUITE A
City-St-Zip: FT MYERS, FL 33907

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: HAL ADAMS D 04/29/2005
Electronic Signature of Signing Officer or Director — Date