2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000024066

FILED Apr 06, 2004 Secretary of State

Entity Name: COMMODORE POINT DEVELOPERS, INC. **Current Principal Place of Business: New Principal Place of Business:** 4460 LEGENDARY DR SUITE 400 DESTIN, FL 32541 **Current Mailing Address: New Mailing Address:** 4460 LEGENDARY DR SUITE 400 DESTIN, FL 32541 FEI Number: 59-3307302 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: LEGLER, MITCHELL W LEGLER, MITCHELL W 300A WHARSFIELD WAY 300A WHARFSIDE WAY JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32207 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: 04/06/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition BOS, PETER H Name: Name: BOS, PETER H JR 4460 LEGENDARY DRIVE, SUITE 400 4460 LEGENDARY DRIVE, SUITE 400 Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541 Title: Title: () Delete () Change () Addition Name: LORENZEN. DWIGHT Name: 4460 LEGENDARY DRIVE, STE 400 Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: Title: () Delete () Change () Addition PARKER, WENDY Name: Name: 4460 LEGENDARY DRIVE, STE 400 Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: () Delete Title: () Change () Addition BUSFIELD, DAVID A Name: Name: Address: 4460 LEGENDARY DRIVE, STE 400 Address: City-St-Zip: City-St-Zip: DESTIN, FL 32541 Title: Title: () Delete (X) Change () Addition BOS, III, PETER H Name: Name: BOS, PETER H III 4460 LEGENDARY DR., STE, 400 Address: 4460 LEGENDARY DR., STE, 400 Address:

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.

City-St-Zip:

DESTIN, FL 32541

SIGNATURE: WENDY PARKER S 04/06/2004

City-St-Zip:

DESTIN, FL 32541