2004 FOR PROFIT CORPORATION ANNUAL REPORT

FII FD DOCUMENT # P98000004440 1. Entity Name V.F. SANCTUARY RIDGE, INC. 04 FEB 16 PM 4: 53 SECRETARY OF CLATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 7777 GLADES ROAD 7777 GLADES ROAD SUITE 300 SUITE 300 BOCA RATON, FL 33434 BOCA RATON, FL 33434 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082004 Chg-P CB2E034 (10/03) City & State City & State Applied For 4. FEI Number 65-0811328 Not Applicable Zin Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DEUTCH, JEFFREY A Street Address (P.O. Box Number is Not Acceptable) 7777 GLADES ROAD SUITE 300 BOCA RATON, FL 33434 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. \Box Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE X Delete TITLE ☐ Change NAME POMERANTZ, SAUL NAME 100028961151 02/18/04--01005--001 **5000.00 STREET ADDRESS 8600 DECARIE BLVD., STE 200 STREET ADDRESS CITY-ST-ZIP TOWN OF MOUNT ROYAL, QC. CITY-ST-ZIP TITLE TVD Delete TITI F Change ☐ Addition GATTINGER, FRANKLIN J. NAME GATTINGER, FRANKLIN J NAME STREET ADDRESS 8600 DECARIE BLVD., STE 200 8600 DECARIE BLVD, SUITE 200 STREET ADDRESS CITY-ST-ZIP TOWN OF MOUNT ROYAL, QC. MOUNT ROYAL, QC, CANADA CITY-ST-ZIP TITLE ASD Delete TITLE Change ☐ Addition ESPOSITO, RAPHAEL Jr ESPOSITO, RALPH JR NAME NAME STREET ADDRESS 8600 DECARIE #200 8600 DECARIE BLVD, SUITE 200 STREET ADDRESS CITY-ST-ZIP MT ROYAL, QC, CANADA, CITY-ST-ZIP MOUNT ROYAL, QC, CANADA CEOSD TITLE CEOD Delete TITLE POMERANTZ, TERRY 8600 DECARIE BLVD, SUITE 200 MOUNT ROYAL, QC, CANADA NAME POMERANTZ, TERRY NAME STREET ADDRESS 8600 DECARIE #200 STREET ADDRESS CITY-ST-7IP MT ROYAL, QC, CANADA, CITY-ST-ZIP TITLE Delete DILE Change ☐ Addition POMERANTZ, TERRY NAME NAME STREET ADDRESS 8600 DECARIE #200 STREET ADDRESS CITY-ST-7tP MT ROYAL, QC, CANADA, CITY-ST-ZIP TITLE PD☐ Delete TITLE ☐ Change X Addition POMERANTZ, ALICE 8600 DECARIE BLVD, SUITE 200 MOUNT ROYAL, QC, CANADA NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this flip does not qualify 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 the and accurate and that my 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 empraced to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an actual statute signature.

Esposito

SIGNATURE: R. GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 04-01-29 514-341-8600

Date

Daytime Phone #