2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004
Secretary of State

DOCUMENT# P98000079352

Entity Name: SANCTUARY SKATE PARK-MACON, INC.

Current Principal Place of Business:

6099 SHALLOWS WAY
NAPLES, FL 34109

New Principal Place of Business:

1045 COLLIER CENTER WAY
SUITE 1
NAPLES, FL 34110

Current Mailing Address:

6099 SHALLOWS WAY
NAPLES, FL 34109

New Mailing Address:

1045 COLLIER CENTER WAY
SUITE 1
NAPLES, FL 34110

FEI Number: 59-3539500 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RICE, LINDA
6099 SHALLOWS WAY
NAPLES, FL 34109

Name and Address of New Registered Agent:

RICE, LINDA
1045 COLLIER CENTER WAY
SUITE 1
NAPLES, FL 34110

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: LINDA RICE 04/14/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: RICE, LINDA
Address: 6099 SHALLOWS WAY
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete
Name: D'AMICO, LINDY
Address: 6099 SHALLOWS WAY
City-St-Zip: NAPLES, FL 34109

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: MILLER, DALE L
Address: 1000 BUFFALO ROAD
City-St-Zip: LEWISBURG, PA 17837

Title: DTS (X) Change ( ) Addition
Name: BARRICK, KELLY L
Address: 1000 BUFFALO ROAD
City-St-Zip: LEWISBURG, PA 17837

Title: DIR ( ) Change (X) Addition
Name: MILLER, MATTHEW M
Address: 1000 BUFFALO ROAD
City-St-Zip: LEWISBURG, PA 17837

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: DALE L. MILLER DP 04/14/2004
Electronic Signature of Signing Officer or Director — Date