2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Sep 14, 2004 8:00 am Secretary of State

DOCUMENT # N18833 09-14-2004 90002 005 ****61.25 THE CALEDONIAN CLUB OF FLORIDA WEST, INC. Principal Place of Business Mailing Address 24085296 P O BOX 19281 P 0 BOX 19281 SARASOTA, FL 34276 SARASOTA, FL 34276 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 08312004 Chg-NP CR2E037 (10/03) 4. FEI Number 59-2822003 City & State City & State Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent OSBORNE, DONALD 6246 WILLET GT Street Address (P.O. Box Number is Not Acceptable) 4283 SHIALA LANE SARASOTA, FL -34235 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 Make check payable to Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by September 8, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Change TITLE Delete Delete TITLE Addition LAWS DAVID 3741 SURREY LANE 3741 SURREY LANE PAULSON, PAMELA E NAME NAME 301 OAK HILL DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34235 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition KEMP, RONALD NAME STREET ADDRESS 4312 PRO AM AVE STREET ADDRESS BRADENTON, FL 34203 CITY-ST-ZIP CITY-ST-ZIP SD TITLE ☐ Delete TITLE ☐ Change ☐ Addition ABRAHAMS, RUBY NAME NAME STREET ADDRESS 1531 CLOWER CREEK DR H 141 STREET ADDRESS SARASOTA, FL 34231 CITY-ST-ZIP CITY-ST-7IP X Delete TITLE ☐ Change MITCHELL JOHN PAMLINE, MITCHELL NAME NAME 328 SORRENTO ST., STREET ADDRESS 328 SORRENTO ST STREET ADDRESS CITY-ST-ZIP VENICE, FL 34293 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition EDMONDS, MANNING WILSHIRE OR 4080 SOUTHERN MANOR CT STREET ADDRESS STREET ADDRESS SARASOTA, FL 34233 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE **X**Addition Change TABER NAME NAME 8021 WATERVIEW BLUP STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRADEN TON

12. I hereby certify that the information supplied with this filling 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 true 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 empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

NATURE SIGNATURE SUDANDO OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

09/04/3004 94/ 93/ 2387 Date 94/ 93/ 2387