2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#751478

FILED Sep 25, 2006 Secretary of State

Entity Name: PARKWAY GROVE CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 16200 NW 2 AVENUE MIAMI, FL 33169 **Current Mailing Address: New Mailing Address:** 16200 NW 2 AVENUE PO BOX 69-4112 MIAMI, FL 33269 MIAMI, FL 33169 FEI Number: 59-2290260 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KATZMAN & KORR, P.A 1501 NW 49TH STREET, SUITE 202 FORT LAUDERDALE, FL 33309 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: LEE KATZMAN OF KATZMAN KORR Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WHILDEN, DEBBIE Name: Name: 16220 NW 2ND AVE #210 Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: Title: () Delete Title: () Change () Addition SMITH, VERONICA Name: Name: Address: 14404 NW 15TH DRIVE Address: City-St-Zip: MIAMI, FL 33167 City-St-Zip: Title: () Delete Title: () Change () Addition JOYEAUX, MICHELLE Name: Name: 16220 NW 2 AVE #314 Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: () Delete Title: Title: (X) Change () Addition WILLIAMS, DIANA DAVENPORT, DEBRA Name: Name: 16220 NW 2ND AVE #310 16200 NW 2 AVENUE #105 Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI, FL 33169 Title: () Delete Title: (X) Change () Addition PASCAL, OSVALDO GRAF, PETER Name: Name: 16200 NW 2ND AVE #101 16220 NW 2 AVENUE #313 Address: Address: MIAMI, FL 33169 City-St-Zip: City-St-Zip: MIAMI, FL 33169

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBBIE WHILDEN P 09/25/2006