

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05179

FILED
Nov 16, 2009
Secretary of State

Entity Name: EAGLE ISLAND ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O RUSSELL WATROUS
5218 EAGLE ISLAND DR.
LAND O LAKES, FL 34639 US

New Principal Place of Business:

Current Mailing Address:

C/O RUSSELL WATROUS
5218 EAGLE ISLAND DR.
LAND O LAKES, FL 34639 US

New Mailing Address:

FEI Number: 59-2902801 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

RUSSELL, WATROUS J
5218 EAGLE ISLAND DR
LAND O LAKES, FL 34639 US

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: RUSSELL J WATROUS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WATROUS, RUSSELL J
Address: 5218 EAGLE ISLAND DR
City-St-Zip: LAND O LAKES, FL 34639

Title: VD () Delete
Name: TAYLOR, LARRY E
Address: 5311 SWALLOW DRIVE
City-St-Zip: LAND O LAKES, FL 34639

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: MATOS, JEANA O
Address: 5209 SWALLOW DRIVE
City-St-Zip: LAND O LAKES, FL 34639

Title: VD () Change (X) Addition
Name: SNYDER, RICHARD J
Address: 522939 SWALLOW DR
City-St-Zip: LAND O LAKES, FL 346

I hereby certify that the information supplied with this filing does not qualify 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: RUSSELL J WATROUS

PRES

11/16/2009

Electronic Signature of Signing Officer or Director

Date