

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000005288

FILED
Nov 11, 2009
Secretary of State

Entity Name: SONOMA BAY COMMUNITY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2121 PONCE DE LEON BLVD., PH
CORAL GABLES, FL 33134

New Principal Place of Business:

2100 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020

Current Mailing Address:

2121 PONCE DE LEON BLVD., PH
CORAL GABLES, FL 33134

New Mailing Address:

2100 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020

FEI Number: 76-0725202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIELDS, GARY
4400 PGA BLVD., STE 900
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

ASSOCIATION LAW GROUP
1666 KENNEDY CAUSEWAY
SUITE 305
NORTH BAY VILLAGE, FL 33141 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: SHERI MCKENZIE

11/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: ADAMS, BRUCE
Address: 2121 PONCE DE LEON BLVD., PH
City-St-Zip: CORAL GABLES, FL 33134

Title: PD () Delete
Name: BEGUIRISTAW, BARBARA
Address: 2121 PONCE DE LEON BLVD., PH
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD () Delete
Name: CRUZ, MAX
Address: 2121 PONCE DE LEON BLVD., PH
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BEGUIRISTAIN, BARBARA
Address: 2100 HOLLYWOOD BLVD
City-St-Zip: HOLLYWOOD, FL 33020

Title: VPD (X) Change () Addition
Name: BRINEGAR, MIKE
Address: 2100 HOLLYWOOD BLVD
City-St-Zip: HOLLYWOOD, FL 33020

Title: STD (X) Change () Addition
Name: ADAMS, BRUCE
Address: 2100 HOLLYWOOD BLVD
City-St-Zip: HOLLYWOOD, FL 33020

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: SHERI MCKENZIE

BKPR

11/11/2009

Electronic Signature of Signing Officer or Director

Date