

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 29, 2009
Secretary of State**

DOCUMENT# N06000007834

Entity Name: VANTAGE POINT CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

10200 GANDY BLVD
ST. PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

6495 SHILOH ROAD
SUITE 400
ALPHARETTA, GA 30005

New Mailing Address:

FEI Number: 20-5302939 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:

DUBOVOY, ARKADIY
13846 ATLANTIC BLVD.
905
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

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: ARKADIY DUBOVOY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUBOVOY, ARKADIY
Address: 6495 SHILOH ROAD SUITE 400
City-St-Zip: ALPHARETTA, GA 30005

Title: D () Delete
Name: DUBOVAYA, VERA
Address: 6495 SHILOH ROAD SUITE 400
City-St-Zip: ALPHARETTA, GA 30005

Title: D () Delete
Name: GARKUSHA, ALEKSANDR
Address: 6495 SHILOH ROAD SUITE 400
City-St-Zip: ALPHARETTA, GA 30005

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: GILLES, JOSHUA
Address: 10200 GANDY BLVD #716
City-St-Zip: ST. PETERSBURG, FL 33702

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

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: ARKADIY DUBOVOY

Electronic Signature of Signing Officer or Director

PD

10/29/2009

Date