

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Nov 04, 2004  
Secretary of State**

DOCUMENT# N17314

Entity Name: WOODBRIAR CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2135 VIRGINIA AVE  
#9  
FORT MYERS, FL 33901

**New Principal Place of Business:**

2135 VIRGINIA AVE  
#5  
FORT MYERS, FL 33901

**Current Mailing Address:**

2135 VIRGINIA AVE  
#9  
FORT MYERS, FL 33901

**New Mailing Address:**

2135 VIRGINIA , AVE  
#5  
FORT MYERS, FL 33901

FEI Number: 04-2690071      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:**

NEWTON, DAVID L  
2135 VIRGINIA AVE  
#9  
FORT MYERS, FL 33901 US

**Name and Address of New Registered Agent:**

LOWE, SIDNEY D  
2135 VIRGINIA .AVE  
#5  
FORT MYERS, FL 33901 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: SIDNEY DARRYL LOWE

11/04/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: HOFFMAN, ROY  
Address: 17151 PALM BEACH BLVD.  
City-St-Zip: ALVA, FL 33920

Title: VD (X) Delete  
Name: EDDY, LARRY  
Address: 2135 VIRGINIA AVE #12  
City-St-Zip: FT. MYERS, FL 33901

Title: SD (X) Delete  
Name: NEWTON, DAVID L  
Address: 2135 VIRGINIA AVE #9  
City-St-Zip: FT. MYERS, FL 33901

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: LOWE, SIDNEY D  
Address: 2135 VIRGINIA AVE #5  
City-St-Zip: FT MYERS, FL 33901

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SIDNEY DARRYL LOWE

PRES

11/04/2004

Electronic Signature of Signing Officer or Director

Date