2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N94000000792

1. Entity Name
THE HOMES AT FOREST LAKE HOMEOWNERS ASSOCIATION, INC.

FILED
05 FEB 17 AM 8:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
9000 W. SHERIDAN STREET SUITE 146 PEMBROKE PINES, FL 33024	12323 SW 55 STREET SUITE 1002 COOPER CITY, FL 33330

01172005 REIN-NP CR2E099 (6/04)

2. Principal Place of Business	3. Mailing Address
4780 N State Road 7	4780 N State Road 7
Suite, Apt. #, etc.: Suite E250	Suite, Apt. #, etc.: Suite E250
City & State: Lauderdale Lakes, FL	City & State: Lauderdale Lakes, FL
Zip: 33319 Country: USA	Zip: 33319 Country: USA

4. FEI Number 65-0468197 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LANDMARK MANAGEMENT SERVICES INC 12323 SW 55 STREET SUITE 1002 COOPER CITY, FL 33330	Name: Phoenix Management Services, Inc. Street Address (P.O. Box Number is Not Acceptable): 4780 N State Rd 7, Suite E250 City: Lauderdale Lakes FL Zip Code: 33319

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Elana Weisenthal January 17, 2005
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HUGHES, DOROTHY 5957 SW 112 LN COOPER CITY, FL 33330	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Gregory Isaacs 5998 SW 112th Drive Cooper City, FL 33330 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ROGERS, LINDA 11227 SW 59 STREET COOPER CITY, FL 33330	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~TD~~ ~~ARONSON, BOB~~ ~~5917 SW 112TH LANE~~ ~~COOPER CITY, FL 33330~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 00004740833O 02/28/05--01081--009 **122.50
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Gregory Isaacs (SD) 5998 SW 112th Drive Cooper City, FL. 33330	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Gregory Isaacs Jan. 31, 2005 954 640-7070
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #