2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000004083

FILED Oct 06, 2005 Secretary of State

Entity Name: AZALEA PARK SAFE NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 26 WILLOW DR. C/O PAT ROBERTS CHRIST THE KING EPISC. CHURCH ORLANDO, FL 32807 **New Mailing Address: Current Mailing Address:** 26 WILLOW DR. C/O PAT ROBERTS CHRIST THE KING EPISC. CHURCH ORLANDO, FL 32807 FEI Number: 59-3641998 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: Name and Address of New Registered Agent: WATKINS, TIM ROBEERTS, PATRICIA K MRS 130 CAPEHART DRIVE 35 WILLOW DRIVE ORLANDO, FL 32807 US US ORLANDO, FL 32807 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: PATRICIA K ROBERTS 10/06/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete WATKINS, TIM ROBERTS, PATRICIA K MRS Name: Name: 130 COPEHART DRIVE Address: 35 WILLOW DRIVE Address: ORLANDO, FL 32807 ORLANDO, FL 32807 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition MORALES, RAMON E Name: Name: Address: 6704 FORSYTH OAK CT Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: () Delete Title: (X) Change () Addition ROBERTS, PAT Name: MAHURON, BEVERLY MRS Name: 35 WILLOW DRIVE 529 HIBISCUS PLACE Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: ORLANDO, FL 32807 Title: () Delete Title: () Change () Addition Name: ALBEE, ALLAN Name: 720 N FORSYTH RD Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: () Delete Title: SIGN () Change (X) Addition MCCANN, BARBARA Name: Name: 23 WILLOW DRIVE Address: Address: ORLANDO, FL 32807 City-St-Zip: 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: PATRICIA K ROBERTS **PRES** 10/06/2005