

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N50749

FILED
Oct 17, 2005
Secretary of State

Entity Name: TEMPLE GROVE ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2658 GREYWALL AVE
OCOE, FL 34761 US

New Principal Place of Business:

P.O. BOX 597
OCOE, FL 34761 US

Current Mailing Address:

2658 GREYWALL AVE
OCOE, FL 34761 US

New Mailing Address:

P.O. BOX 597
OCOE, FL 34761 US

FEI Number: 59-3140690

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIKES, PATRICK
2658 GREYWALL AVE
OCOE, FL 34761 US

Name and Address of New Registered Agent:

JOHNSON, EDWARD L
500 CANBY CIRCLE
OCOE, FL 34761 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: EDWARD L. JOHNSON

10/17/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SPIKES, PATRICK
Address: 2658 GREYWALL AVE
City-St-Zip: OCOE, FL 34761 US

Title: DV () Delete
Name: JOHNSON, EDWARD
Address: 500 CANBY CIR
City-St-Zip: OCOE, FL 34761

Title: SD () Delete
Name: HUGGINS, DIANNA
Address: 2488 AULD SCOTT BLVD
City-St-Zip: OCOE, FL 34761

Title: T () Delete
Name: POCHÉ, ROBIN
Address: 2642 GREYWALL AVE
City-St-Zip: OCOE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOHNSON, EDWARD L
Address: 500 CANBY CIRCLE
City-St-Zip: OCOE, FL 34761 US

Title: V (X) Change () Addition
Name: PEARCE, DAVID
Address: 347 BRAVADA STREET
City-St-Zip: OCOE, FL 34761

Title: S (X) Change () Addition
Name: HUGGINS, DIANNA
Address: 2488 AULD SCOTT BLVD
City-St-Zip: OCOE, FL 34761

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: EDWARD L. JOHNSON

P

10/17/2005

Electronic Signature of Signing Officer or Director

Date