2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N40754

FILED Oct 10, 2008 Secretary of State

Entity Name: LAKESIDE VILLAGE AND CONWAY CABANA CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 4819 BIG OAKS LANE 4806 BIG OAKS LANE ORLANDO, FL 32806 US ORLANDO, FL 32806 US **Current Mailing Address: New Mailing Address:** 4819 BIG OAKS LANE 4806 BIG OAKS LANE ORLANDO, FL 32806 US ORLANDO, FL 32806 US FEI Number: 59-2883439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DARRELL, JOHNSON STRAWN, LAWRENCE M 4819 BIG ÓAKS LANE 4806 BIG OAKS LANE ORLANDO, FL 32806 US US ORLANDO, FL 32806 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: LAWRENCE M. STRAWN 10/10/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FLINCHBAUGH, HEIDI Name: Name: 4855 BIG OAKS LANE Address: Address: ORLANDO, FL 32806 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition TAYLOR, EMMETT Name: STRAWN, LAWRENCE M Name: Address: 49843 BIG OAKS LANE Address: 4806 BIG OAKS LANE City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806 Title: BMD () Delete Title: SEC (X) Change () Addition SANBORN, KATHY SANBORN, KATHY Name: Name: 4807 BIG OAKS LANE Address: Address: 4837 BIG OAKS LANE City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL Title: () Delete Title: () Change () Addition Name: JOHNSON, DARRELL Name: 4819 BIG OAKS LANE Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: BMD Title: () Delete Title: **BMD** (X) Change () Addition STRAWN, LAWRENCE Name: Name: REICHE, MARILYN 4858 BIG OAKS LANE 4858 BIG OAKS LANE Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806 Title: () Delete Title: (X) Change () Addition SHOEMAKER, RONDI SHAFER, LEO Name: Name: Address: 4801 BIG OAKS LANE Address: 4843 BIG OAKS LANE ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806 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: LAWRENCE M. STRAWN T 10/10/2008