


# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT #</b> N06000007558 1. Entity Name <b>CASTELLINA HOMEOWNERS' ASSOCIATION, INC.</b>						2008 DEC 18 PM 12:26  12/18/08	
Principal Place of Business <b>3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426</b>				Mailing Address <b>3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426</b>			
2. Principal Place of Business - No P.O. Box #				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
<b>6. Name and Address of Current Registered Agent</b>  <b>ASHBY, STEVEN— 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426</b>				<b>7. Name and Address of New Registered Agent</b> Name <b>Kevin Borkenhagen</b> Street Address (P.O. Box Number is Not Acceptable) <b>3301 Quantum Blvd., 1st Floor</b> City <b>Boynton Beach</b> FL Zip Code <b>33426</b>			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <b>11/5/08</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$61.25</b> <b>After January 1, 2009, Fee will be \$122.50</b>				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		Make check payable to <b>Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORKENHAGEN, KEVIN 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>000138875340</b> <b>12/10/08--01026--006 **\$1.25</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ASHBY, STEVE 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>DIRECTOR</b> <b>HEATHER OVERMYER</b> <b>3301 QUANTUM BLVD., 1ST FL</b> <b>BOYNTON BEACH, FL 33426</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REYNOLDS, MIKE 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>DIRECTOR</b> <b>STEVE SVODA</b> <b>3301 QUANTUM BLVD., 1ST FLOOR</b> <b>BOYNTON BEACH, FL 33426</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YUTER, RONALD 123 NW 13TH STREET BOCA RATON, FL 33432 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUSSELL, TAD 123 NW 13TH STREET BOCA RATON, FL 33432 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.							
<b>SIGNATURE:</b> _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <b>12/15/08</b> Daytime Phone # <b>561-526-1022</b>			