2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 02, 2009
Secretary of State

DOCUMENT# N00000001462

Entity Name: CHASTAIN DEVELOPMENT CORP.

Current Principal Place of Business:

2730 CUMBERLAND BLVD.
SYRNA, GA 30080

New Principal Place of Business:

Current Mailing Address:

2730 CUMBERLAND BLVD.
SYRNA, GA 30080

New Mailing Address:

FEI Number: 58-1847119 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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: NATIONAL REGISTERED AGENTS, INC.
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DUMAS, MARK M
Address: 2257 NORBURY DRIVE
City-St-Zip: SMYRNA, GA 30080

Title: D ( ) Delete
Name: ADAMS, OC
Address: 1425 SYLVAN CIRCLE NE
City-St-Zip: ATLANTA, GA

Title: D ( ) Delete
Name: WESTRAAD, LEIGH C
Address: 954 WATERWAY LANE
City-St-Zip: MYRTLE BEACH, SC 29572

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: DUMAS, DOUGLAS F
Address: 415 16TH AVENUE EAST
City-St-Zip: SEATTLE, WA 98112

Title: D (X) Change ( ) Addition
Name: ADAMS, OC
Address: 1425 SYLVAN CIRCLE NE
City-St-Zip: ATLANTA, GA 30080

Title: ( ) Change ( ) Addition
Name:
Address:
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: DOUGLAS F. DUMAS PRES 11/02/2009
Electronic Signature of Signing Officer or Director — Date