

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N20471

**FILED**  
**Jul 23, 2012**  
**Secretary of State**

**Entity Name:** THE CENTER OF COMMERCE AT ORLANDO OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

3000 MERCY DR.  
ORLANDO, FL 32808 US

**New Principal Place of Business:**

255 ALHAMBRA  
SUITE 312  
CORAL GABLES, FL 33134 US

**Current Mailing Address:**

3000 MERCY DR.  
ORLANDO, FL 32808 US

**New Mailing Address:**

255 ALHAMBRA  
SUITE 312  
CORAL GABLES, FL 33134 US

**FEI Number:** 59-2965059

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DEVON, GERALD  
2000 MERCY DRIVE  
ORLANDO, FL 32808 US

**Name and Address of New Registered Agent:**

TRANSWESTERN  
255 ALHAMBRA  
SUITE 312  
CORAL GABLES, FL 33134 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: MARTA FERNANDEZ

07/23/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BODIN, SCOTT  
Address: 255 ALHAMBRA  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VPD  
Name: FERNANDEZ, MARTA  
Address: 255 ALHAMBRA  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: SD  
Name: KNAGGS, CAROL  
Address: 255 ALHAMBRA  
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby 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 all other like empowered.

SIGNATURE: MARTA FERNANDEZ

VPD

07/23/2012

Electronic Signature of Signing Officer or Director

Date