2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT #715571 06 DEC - 1 AM 10: 21 CYPRESS GARDENS CONDOMINIUM, INC. SECRETALL OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 2219-2225 PLK ST. 2219-2225 PLK ST. HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 11012006 REIN-NP CR2E099 (11/05) City & State City & State-FEI Number 59-1285770 Applied For Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CYPRESS GARDENS CONDO ASSN. 2219 POLK ST. Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD, FL 33020 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registe red agent and tale it applicat FILE NOWII! FEE IS \$236.25 Make check payable to After January 1, 2007, Fee will be \$297.50 Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE 400082214 MCGOWAN, KATHRYN NAME NAME 12/01/06--01056--005 2219 POLK STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33020 CITY-ST-ZIP VPD Delete ☐ Change ★Addition TITLE TITLE PUNZIANO, MICHAEL NAME NAME 2219 POLK STREET STREET ADDRESS STREET ADDRESS HOLLYWOOD, FL 33020 CITY-ST-ZIP CITY-ST-ZIF TITLE ☐ Delete TITLE ☐ Change ☐ Addition BELANGER, MICHELLE NAME NAME 400082214224 STREET ADDRESS 2225 POLK ST., #103 STREET ADDRESS 12/01/06--01056--006 **81.25 CITY-ST-ZIP HOLLYWOOD, FL 33020 CITY-ST-ZIP TD Delete TITLE Channe ☐ Addition TITLE HORN, MARY NAME NAME STREET ADDRESS 2219 POLK STREET STREET ADDRESS HOLLYWOOD, FL 33020 CITY-ST-ZIP CITY-ST-ZIP TITLE 🗘 Delete TITLE Addition MITCHELL KENT NAME NAME 2219 POLK STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33020 CITY-ST-ZIP ☐ Change ☐ Delete Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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.

FILED

Daytime Phone #