2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#727213

FILED Sep 12, 2008 Secretary of State

Entity Name: OXFORD HOUSE OF PORT CHARLOTTE-A CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business:

CHARLOTTE SQUARE CONDOMINIUMS MANAGERS OFFICE 2296 AARON ST. PORT CHARLOTTE, FL 33952

Current Mailing Address: New Mailing Address:

CHARLOTTE SQUARE CONDOMINIUMS MANAGERS OFFICE 2296 AARON ST. PORT CHARLOTTE, FL 33952

FEI Number: 59-1574998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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: Name and Address of New Registered Agent:

PRICE, WILLIAM 21267 GERTRUDE AVE #206 PT CHARLOTTE, FL 33952 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: WILLIAM PRICE

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: PD (X) Change () Addition Name: TOMSIGNANE, AL Name: PRICE, WILLIAM

Address: 2126 GEPTPLIDE AVE 114

 Address:
 2126 GERTRUDE AVE 114
 Address:
 21267 GERTRUDE AVE #206

 City-St-Zip:
 PORT CHARLOTTE, FL 33952
 City-St-Zip:
 PORT CHARLOTTE, FL 33952

Title: PD () Delete Title: TSD (X) Change () Addition

Name: PRICE, WILLIAM Name: PAVLETICH, VICKI

 Address:
 21267 GERTRUDE AVE #206
 Address:
 21267 GERTRUDE AVE #213

 City-St-Zip:
 PORT CHARLOTTE, FL 33952
 City-St-Zip:
 PORT CHARLOTTE, FL 33952

 $\label{eq:title: SX () Delete Title: D (X) Change () Addition} \end{minipage}$

Name: TOMSIGNANT, BARBARA Name: COPPOLA, MATT
Address: 2127 GERTRUDE AVE 114 Address: 21267 GERTRUDE AVE #103

Address: 2127 GERTRUDE AVE 114 Address: 21267 GERTRUDE AVE #103
City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D (X) Delete Title: () Change () Addition

 Name:
 COPPOLA, HENRY
 Name:

 Address:
 21267 GEETRUDE AVE 101
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33952
 City-St-Zip:

Title: TD (X) Delete Title: () Change () Addition

 Name:
 BUCK, DOUĠLÁS
 Name:

 Address:
 21267 GERTRUDE AVE #
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33952
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 PRICE, WILLIAM
 Name:

 Address:
 21267 GEETRUDE AVE 206
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33952
 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: WILLIAM PRICE PD 09/12/2008