

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 728811

**FILED**  
**Jan 24, 2013**  
**Secretary of State**

**Entity Name:** PATIO VILLAGE CORPORATION, INC.

**Current Principal Place of Business:**

6135 66 ST NORTH  
PATIO VILLAGE OFFICE  
ST PETERSBURG, FL 33709

**New Principal Place of Business:**

**Current Mailing Address:**

6135 66 ST NORTH  
PATIO VILLAGE OFFICE  
ST PETERSBURG, FL 33709

**New Mailing Address:**

**FEI Number:** 59-1548640

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORGAN, MIKE  
6135-66TH ST N, LOT 310  
SAINT PETERSBURG, FL 33709 US

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

HOGAN, JOCELYNE  
6135-66TH ST N, LOT 318  
SAINT PETERSBURG, FL 33709 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: JOCELYNE HOGAN

01/24/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KORN, CHERI  
Address: 6135 66TH ST N #217  
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: VP  
Name: SHICK, JIM  
Address: 6135 66TH ST N #403  
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: D  
Name: HALLETT, IRENE  
Address: 6135 66TH STREET N #314  
City-St-Zip: ST PETERSBURG, FL 33709

Title: D  
Name: GOLLEY, JANET  
Address: 6135 66TH ST N LOT #107  
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: D  
Name: MOUCATEL, THOMAS  
Address: 6135 66TH N LOT #215  
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: D  
Name: HOOD, TERRY  
Address: 6135 66TH ST N #512  
City-St-Zip: ST PETERSBURG, FL 33709

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: JOCELYNE HOGAN

RA

01/24/2013

Electronic Signature of Signing Officer or Director

Date