

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 728894

**FILED**  
**Oct 26, 2004**  
**Secretary of State****Entity Name:** NICOLE APARTMENTS, INC.**Current Principal Place of Business:**% ASSOCIATED PROPERTY MANAGEMENT  
1928 LAKE WORTH ROAD  
LAKE WORTH, FL 33461**New Principal Place of Business:**1105 SOUTH G ST  
LAKE WORTH, FL 33461**Current Mailing Address:**% ASSOCIATED PROPERTY MANAGEMENT  
1928 LAKE WORTH ROAD  
LAKE WORTH, FL 33461**New Mailing Address:**20 THURLOW DR  
BOYNTON BEACH, FL 33426**FEI Number:** 59-2165894**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ASSOCIATED PROPERTY MANAGEMENT  
1928 KAJE WORTH ROAD  
LAKE WORTH, FL 33461 US**Name and Address of New Registered Agent:**PERSAUD, SURRENDRA  
2885 CAMBRIDGE RD.  
LANTANA, FL 33462 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: SURRENDRA PERSAUD

10/26/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: BERK, JACK  
Address: 704 XANADU PLACE  
City-St-Zip: JUPITER, FL 33477Title: STD ( ) Delete  
Name: KARLSEN, VICTORIA  
Address: 720 N. DIXIE HWY #301  
City-St-Zip: LANTANA, FL 33462Title: D (X) Delete  
Name: ANTILLA,  
Address: 1517 NO. L STREET  
City-St-Zip: LAKE WORTH, FL 33460**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change ( ) Addition  
Name: PERSAUD, SURRENDRA  
Address: 2885 CAMBRIDGE RD.  
City-St-Zip: LANTANA, FL 33462Title: STD (X) Change ( ) Addition  
Name: CAMEJO, KIMBERLY  
Address: 20 THURLOW DR  
City-St-Zip: BOYNTON BEACH, FL 33426Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SURRENDRA PERSAUD

PD

10/26/2004

Electronic Signature of Signing Officer or Director

Date