

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 735064

FILED
Apr 29, 2011
Secretary of State

Entity Name: VILLAS OF OCEAN RIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5900 OLD OCEAN BLVD.
OCEAN RIDGE, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

5900 OLD OCEAN BLVD.
OCEAN RIDGE, FL 33435 US

New Mailing Address:

FEI Number: 59-1652721

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILLAS OF OCEAN RIDGE HOMEOWNERS
5900 OLD OCEAN BLVD
OCEAN RIDGE, FL 33435 US

Name and Address of New Registered Agent:

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: SANDY FOSTER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: FOSTER, SANDY
Address: 5900 OLD OCEAN BLVD #B-2
City-St-Zip: OCEAN RIDGE, FL 33435

Title: VP
Name: DULWORTH, ELIZABETH J
Address: 5900 OLD OCEAN BLVD. #C-3
City-St-Zip: OCEAN RIDGE, FL 33435

Title: S/TR
Name: HERRIET, TARKIAINEN
Address: 5900 OLD OCEAN BLVD #A-8
City-St-Zip: OCEAN RIDGE, FL 33435

Title: MEMB
Name: SUTHERLAND, DAN
Address: 5900 OLD OCEAN BLVD #A-3
City-St-Zip: OCEAN RIDGE, FL 33435

Title: MEMB
Name: GRADLE, JOYCE
Address: 5900 OLD OCEAN BLVD
City-St-Zip: OCEAN RIDGE, FL 33435

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: SANDY FOSTER

PRES

04/29/2011

Electronic Signature of Signing Officer or Director

Date