

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 748096

**FILED**  
**Sep 29, 2010**  
**Secretary of State**

**Entity Name:** MISSION VIEJO CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6944 PALMETTO CIR. SO. #301  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

% SCULLY COMPANY  
801 OLD YORK ROAD  
JENKINTOWN, PA 19046 US

**New Mailing Address:**

**FEI Number:** 59-1974305      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: NRAI SERVICES INC

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCULLY, JAMES D JR  
Address: 801 OLD YORK ROAD  
City-St-Zip: JENKINTOWN, PA 19046

Title: VPD  
Name: HOLLIN, WILLIAM  
Address: 801 OLD YORK ROAD  
City-St-Zip: JENKINTOWN, PA 19046

Title: TD  
Name: HARNER, ROBERT A  
Address: 801 OLD YORK ROAD  
City-St-Zip: JENKINTOWN, PA 19046

Title: SD  
Name: WILSON, PETER D  
Address: 801 OLD YORK ROAD  
City-St-Zip: JENKINTOWN, PA 19046

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: ROBERT A. HARNER

DIR

09/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date