

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 749924

FILED
Mar 05, 2007
Secretary of State

Entity Name: AQUA GARDENS TOWNHOUSE ASSOCIATION, INC.

Current Principal Place of Business:

2000 FORREST NELSON BLVD
PORT CHARLOTTE, FL 33952 US

New Principal Place of Business:

Current Mailing Address:

C/O STAR HOSP. MGMT
6025 TAYLOR RD #2
PUNTA GORDA, FL 33950 US

New Mailing Address:

C/O KEUKER TAX SERVICE, INC.
1931 TAMIAMI TR., STE 12
PORT CHARLOTTE, FL 33948 US

FEI Number: 59-1955352

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAR HOSPITALITY MGMT
6025 TAYLOR RD #2
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

KEUKER TAX SERVICE, INC.
1931 TAMIAMI TRAIL, SUITE 12
PORT CHARLOTTE, FL 33948 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: OSCAR A F KEUKER

03/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: ROYER, PATRICIA
Address: 2000 FORREST NELSON BLVD
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: PD () Delete
Name: KAUPPI, MICHAEL
Address: 2000 FORREST NELSON BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VD () Delete
Name: SAUNDERS, ESTHER
Address: 2000 FOREST NELSON BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAUNDERS, ESTHER
Address: 2000 FORREST NELSON BLVD C-3
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VPD (X) Change () Addition
Name: VOSS, GISELA
Address: 2000 FORREST NELSON BLVD. C-5
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D (X) Change () Addition
Name: DUFFY, PHYLLIS
Address: 2000 FOREST NELSON BLVD. C-6
City-St-Zip: PORT CHARLOTTE, FL 33952

I hereby certify that the information supplied with this filing does not qualify for the 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: ESTHER SAUNDERS

PRES

03/05/2007

Electronic Signature of Signing Officer or Director

Date