2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 757705

FILED Oct 09, 2007 Secretary of State

Entity Name: ISLAND VILLAGE OF HUTCHINSON ISLAND OWNERS ASSOCIATION, INC.

| Current Pr | incipal Place of Business: | New Principal I | New Principal Place of Business: | |
|---|---|---|---|--|
| 969 SOUTH STE 401 STUART, F | H FEDERAL HWY FL 34994 | | | |
| Current Mailing Address: | | New Mailing A | New Mailing Address: | |
| 1111 SE FE STE 100 STUART, F | EDERAL HWY FL 34994 | | | |
| | 59-1910166 FEI Number Applied For() e with s. 607.193(2)(b), F.S., the corporation did not Address of Current Registered Agent: | • | () Certificate of Status Desired () ress of New Registered Agent: | |
| SIGNATUR 969 SOUTH STE 401 | RE PROPERTY MANAGEMENT, INC. H FEDERAL HWY FL 34994 US | | | |
| The above in the State | named entity submits this statement for the proof of Florida. | urpose of changing its reg | istered office or registered agent, or both, | |
| SIGNATUR | RE: DIANE HARRISON | | | |
| | Electronic Signature of Registered Age | nt | Date | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CH | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | STD () Delete RAUGH, EILEEN 9439 S OCEAN DR #5-D JENSEN BEACH, FL 34957 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | PD () Delete FIELDS, RAY 9401 S OCEAN DR 4-D JENSEN BEACH, FL | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () Delete STRUNGIS, ANTHONY 9401 S OCEAN DR 4A JENSEN BEACH, FL 34957 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () Delete KRAUSE, MARGARET 435 S OCEAN DR 8-C JENSEN BEACH, FL | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () Delete FOURMY, JR, JOHN 9433 S. OCEAN DR #7-C JENSEN BEACH, FL 34957 | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |

I hereby certify that the information supplied with this filing does not qualify 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: EILEEN RAUGH STD 10/09/2007