2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 759333

FILED Apr 25, 2005 Secretary of State

Entity Name: ATLANTIS II, A CONDOMINIUM, INC. **Current Principal Place of Business: New Principal Place of Business:** 1800 D NICKLAUS DR TALLAHASSEE, FL 32301 US **Current Mailing Address: New Mailing Address:** 1800 D NICKLAUS DR TALLAHASSEE, FL 32301 US FEI Number: 59-2217036 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STOKES, BURNHAM 1800 D NICKLAUS DR TALLAHASSEE, FL 32301 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: BURNHAM E. STOKES Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition STOKES, BURNHAM Name: Name: Address: 1800 D NICKLAUS DR Address: City-St-Zip: TALLAHASSEE, FL 32301 US City-St-Zip: Title: () Delete Title: () Change () Addition LATIMORE, MICHELLE Name: Name: Address: 1800 B NICKLAUS Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: Title: () Delete Title: () Change () Addition BLISSARD, EDMOND Name: Name: Address: 1815 H NICKLAUS DR Address: City-St-Zip: TALLAHASSEE, FL 32301 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: BURNHAM STOKES PRES 04/25/2005