

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 760010

**FILED**  
**Oct 11, 2005**  
**Secretary of State**

**Entity Name:** SHARONDALE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

187 FOREST LAKES BLVD.  
NAPLES, FL 34105 US

**New Principal Place of Business:**

**Current Mailing Address:**

187 FOREST LAKES BLVD.  
NAPLES, FL 34105 US

**New Mailing Address:**

GUARDIAN PROPERTY MGMT  
6700 LONE OAK BLVD  
NAPLES, FL 34119 US

**FEI Number:** 59-2353098 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GRACEY, ROBERT  
187 FOREST LAKES BLVD.  
NAPLES, FL 34105 US

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

ROSS, BYRON  
6700 LONE OAK BLVD  
NAPLES, FL 34119 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: BYRON ROSS

10/11/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DVP ( ) Delete  
Name: MULREADY, CAROL  
Address: 114 CYPRESS WAY E #D5  
City-St-Zip: NAPLES, FL

Title: D ( ) Delete  
Name: FULLTON, JOAN  
Address: 116 CYPRESS WAY E, G5  
City-St-Zip: NAPLES, FL 34110

Title: PD ( ) Delete  
Name: MULVEY, JOHN  
Address: 122 CYPRESS WAY E #C-1  
City-St-Zip: NAPLES, FL

Title: D ( ) Delete  
Name: THACKERY, GAETANA  
Address: 118 CYPRESS WAY E., A1  
City-St-Zip: NAPLES, FL 34110

Title: STD (X) Delete  
Name: SNEED, BARBARA  
Address: 130 CYPRESS WAY E., B3  
City-St-Zip: NAPLES, FL 34110

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BARKER, CYNTHIA  
Address: 114 CYPRESS WAY E #D2  
City-St-Zip: NAPLES, FL 34110

Title: VP (X) Change ( ) Addition  
Name: FULLTON, JOAN  
Address: 110 CYPRESS WAY E, F2  
City-St-Zip: NAPLES, FL 34110

Title: S (X) Change ( ) Addition  
Name: FORD, JULIE  
Address: 122 CYPRESS WAY E #C-3  
City-St-Zip: NAPLES, FL 34110

Title: T (X) Change ( ) Addition  
Name: MOTRONI, DENISE  
Address: 116 CYPRESS WAY E., G-1  
City-St-Zip: NAPLES, FL 34110

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: BYRON ROSS

MGR

10/11/2005

Electronic Signature of Signing Officer or Director

Date