2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 24, 2008
Secretary of State

DOCUMENT# 767293

Entity Name: LAS OLAS ASSOCIATION, INC.

Current Principal Place of Business:

904 E. LAS OLAS BLVD.
FT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

904 E. LAS OLAS BLVD.
FT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 59-2296268 **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:

LEACH, MARC
904 E. LAS OLAS BLVD.
FT LAUDERDALE, FL 33301 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: MARC LEACH

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HILLIER, ANDREW
Address: 904 E. LAS OLAS BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VD ( ) Delete
Name: KOUNARIS, CYNTHIA
Address: 904 E. LAS OLAS BLVD.
City-St-Zip: FT LAUDERDALE, FL 33301

Title: S ( ) Delete
Name: LEACH, MARC
Address: 904 E. LAS OLAS BLVD.
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: T ( ) Delete
Name: WAGNER, PAUL
Address: 904 E. LAS OLAS BLVD.
City-St-Zip: FT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MARC LEACH MR 10/24/2008

Electronic Signature of Signing Officer or Director — Date