

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 767350

FILED
Oct 06, 2009
Secretary of State

Entity Name: 21/22 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4514 VIRGINIA DR
BALDWIN PARK
ORLANDO, FL 32814

New Principal Place of Business:

2663 UPPER PARK ROAD
BALDWIN PARK
ORLANDO, FL 32814

Current Mailing Address:

901 PONCE DE LEON BLVD
SUITE #505
CORAL GABLES, FL 33134

New Mailing Address:

2663 UPPER PARK ROAD
BALDWIN PARK
ORLANDO, FL 32814

FEI Number: 59-2719935 **FEI Number Applied For** () **FEI Number Not Applicable** () **Certificate of Status Desired** (X)
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:

WRIGHT, MICHAEL E
4514 VIRGINIA DR
BALDWIN PARK
ORLANDO, FL 32814 US

Name and Address of New Registered Agent:

WRIGHT, MICHAEL E
2663 UPPER PARK ROAD
BALDWIN PARK
ORLANDO, FL 32814 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: MICHAEL E. WRIGHT

10/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WRIGHT, MICHAEL
Address: 4514 VIRGINIA DR BALDWIN PRK
City-St-Zip: ORLANDO, FL 32814

Title: T (X) Delete
Name: JACKSON, TIM
Address: 2274 DOGWOOD GLENN COVE
City-St-Zip: GERMANTOWN, TN 38139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WRIGHT, MICHAEL
Address: 2663 UPPER PARK RD BALDWIN PRK
City-St-Zip: ORLANDO, FL 32814

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: MICHAEL E. WRIGHT

P

10/06/2009

Electronic Signature of Signing Officer or Director

Date