2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#768206

FILED Oct 06, 2009 Secretary of State

Entity Name: ALPINE VILLAS WEST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: P. O. BOX 15144 3107 POOLSIDE DRIVE WEST PALM BEACH, FL 334165514 GREENACRES, FL 33463 **Current Mailing Address: New Mailing Address:** P. O. BOX 15144 P. O. BOX 16154 WEST PALM BEACH, FL 334165514 WEST PALM BEACH, FL 334165514 FEI Number: 59-2641582 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: DICKER, EDWARD DICKER, KRIVOK & STOLOFF 1818 AUSTRALIAN AVE. S., STE 400 EDWARD DICKER OF ST. JOHN KING & DICKER 1818 AUSTRALIAN AVE. S., STE. 400 WEST PALM BCH., FL 33409 WEST PALM BCH., FL 33409 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: EDWARD DICKER 10/06/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KNOTH, GRAHAM Name: Name: 2328 LENA LN Address: Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: Title: () Delete Title: (X) Change () Addition GREENE, MARY BETH Name: KNOTH, TANYA Name: Address: 2454 LENA LN Address: 2328 LENA LN City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: WEST PALM BEACH, FL 33415 Title: () Delete Title: (X) Change () Addition KNOTH, TANYA GREEN, WESLEY Name: Name: Address: 2328 LENA LN Address: 2454 LENA LN City-St-Zip: W. PALM BEACH, FL 33415 City-St-Zip: W. PALM BEACH, FL 33415 Title: () Delete Title: () Change () Addition Name: MUHLERWORTH, KEN Name: Address: 2401 LENA LANE Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: Title: (X) Delete Title: () Change () Addition GREEN, WES Name: Name: 2454 LENA LANE Address: Address: WEST PALM BEACH, FL 33415 City-St-Zip: 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: TANYA KNOTH T 10/06/2009