

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 770913

FILED
Feb 15, 2005
Secretary of State

Entity Name: COMMERCE CENTER I ASSOCIATION, INC.

Current Principal Place of Business:

1479 SE VILLAGE GREEN DR
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

1469 SE VILLAGE GREEN DR
PORT SAINT LUCIE, FL 34952

Current Mailing Address:

1479 SE VILLAGE GREEN DR
PORT SAINT LUCIE, FL 34952

New Mailing Address:

1469 SE VILLAGE GREEN DR
PORT SAINT LUCIE, FL 34952

FEI Number: 59-2357948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIBERT, V CAROL
1479 SE VILLAGE GREEN DR
PORT ST. LUCIE, FL 33452 US

Name and Address of New Registered Agent:

JAFFIN, KATHERINE
1469 SE VILLAGE GREEN DR
PORT ST. LUCIE, FL 33452 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: KATHERINE JAFFIN

02/15/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SIBERT, RAYMOND
Address: 1479 SE VILLAGE GREEN DR
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: ST () Delete
Name: IZZO, PETER
Address: 1479 SE VILLAGE GREEN DR
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: PD () Delete
Name: SIBERT, CAROL
Address: 1479 SE VILLAGE GREEN DR
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: GILBERT, RANDY
Address: 1479 SE VILLAGE GREEN DR
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: ST (X) Change () Addition
Name: JAFFIN, KATHERINE
Address: 1469 SE VILLAGE GREEN DR
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: PD (X) Change () Addition
Name: SESTA, ANDREW
Address: 1449 SE VILLAGE GREEN DR
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: KATHERINE JAFFIN

ST

02/15/2005

Electronic Signature of Signing Officer or Director

Date