2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 25, 2004
Secretary of State

DOCUMENT# N00000000180

Entity Name: G & W PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13260 PAULSON DR
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

Current Mailing Address:

13260 PAULSON DR
UNIT 2-3-4
PORT CHARLOTTE, FL 33954

New Mailing Address:

FEI Number: 65-1115337 **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:

JOYCE, THOMAS
18260 PAULSON DRIVE
UNIT 2-3-4
PORT CHARLOTTE, FL 33948 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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	VSD	( ) Delete
Name:	GORMAN, MELISSA A	
Address:	POST OFFICE BOX 2282	
City-St-Zip:	PORT CHARLOTTE, FL 33945	
Title:	PTD	( ) Delete
Name:	WOLFF, CHERYL J	
Address:	18260 PAULSON DRIVE UNIT C	
City-St-Zip:	PORT CHARLOTTE, FL 33949	
Title:	D	( ) Delete
Name:	JOYCE, THOMAS	
Address:	18260 PAULSON DRIVE UNIT D-1	
City-St-Zip:	PORT CHARLOTTE, FL 33949	

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:	

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: THOMAS JOYCE PRES 10/25/2004

Electronic Signature of Signing Officer or Director — Date