## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N0000001434

FILED Dec 13, 2006 Secretary of State

Entity Name: HERITAGE HARBOUR MARKET PLACE ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business: ADVANCED MGMT. 551 N CATTLEMEN RD 9031 TOWN CENTER PKWY. SUITE 202 BRADENTON, FL 34202 SARASOTA, FL 34232 New Mailing Address: **Current Mailing Address:** ADVANCED MGMT 551 N CATTLEMEN RD 9031 TOWN CENTER PKWY. SUITE 202 BRADENTON, FL 34202 SARASOTA, FL 34232 FEI Number: 65-1059005 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: ADVANCED MGMT SHIELDS, CHRISTOPHER J ESQ 9031 TOWN CENTER PKWY. 1833 HENDRY ST US BRADENTON, FL 34202 FT MYERS, FL 33902 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: CHRISTOPHER J. SHIELDS, ESQ 12/13/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SQUITIERI, ANTHONY Name: Name: 551 N CATTLEMAN RD. STE 202 Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: ALLEGRA, ROBERT T Name: Address: 551 N. CATTLEMAN RD. STE 200 Address: City-St-Zip: SARASOTA, FL 34230 City-St-Zip: Title: STD () Delete Title: (X) Change ( ) Addition SABEAN, BRIAN Name: CAMPBELL, ERNEST M Name: 10481 SIX MILE CYPRESS PKWY Address: Address: 551 N CATTLEMEN RD, STE 202 City-St-Zip: FT. MYERS, FL 33912 City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY J SQUITIERI PD 12/13/2006