2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 09, 2009
Secretary of State

DOCUMENT# N01000008233

Entity Name: MUTINY ON THE PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2889 MCFARLANE ROAD
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2889 MCFARLANE ROAD
MIAMI, FL 33133

New Mailing Address:

FEI Number: 65-1157854 **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:

URDANETA, VIRGINIA
2889 MCFARLANE RD
MIAMI, FL 33133 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: VIRGINIA URDANETA

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DENISON, FLOYD
Address: 2889 MCFARLANE ROAD
City-St-Zip: MIAMI, FL 33133

Title: O ( ) Delete
Name: LOPEZ, CONRAD
Address: 2889 MCFARLANE RD
City-St-Zip: MIAMI, FL 33133

Title: O ( ) Delete
Name: LENNOX, EDWIN
Address: 2889 MCFARLANE RD
City-St-Zip: MIAMI, FL 33133

Title: O ( ) Delete
Name: LEBER, GRAUT
Address: 2889 MCFARLANE RD
City-St-Zip: MIAMI, FL 33133

Title: O ( ) Delete
Name: SIEGLER, MAXINE
Address: 2889 MCFARLANE RD
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SIEGLER, MAXINE
Address: 2889 MCFARLANE ROAD
City-St-Zip: MIAMI, FL 33133

Title: O (X) Change ( ) Addition
Name: SMILJANIC, JOHN
Address: 2889 MCFARLANE RD
City-St-Zip: MIAMI, FL 33133

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: O (X) Change ( ) Addition
Name: SMIT, ROBERT
Address: 2889 MCFARLANE RD
City-St-Zip: MIAMI, FL 33133

Title: O (X) Change ( ) Addition
Name: ROGACHENKO, WALTER
Address: 2889 MCFARLANE RD
City-St-Zip: MIAMI, FL 33133

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: HANY GABRIEL MR. 10/09/2009

Electronic Signature of Signing Officer or Director — Date