

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N02000007477

**FILED**  
**Aug 29, 2011**  
**Secretary of State**

**Entity Name:** 1804 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1804 MICCOSUKEE COMMONS DR.  
STE 210  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

1804 MICCOSUKEE COMMONS DR.  
STE 210  
TALLAHASSEE, FL 32308

**New Mailing Address:**

**FEI Number:** 53-0800289

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REED, CHARLES J  
2828 REMINGTON GREEN S.  
TALLAHASSEE, FL 32308 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:** CHARLES REED

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** PRINTY, GARY  
**Address:** 1804 MICCOSUKEE COMMONS DR., 200  
**City-St-Zip:** TALLAHASSEE, FL 32308

**Title:** VPD  
**Name:** LOURENCO, LUIZ  
**Address:** 1804 MICCOSUKEE COMMONS DR., 208  
**City-St-Zip:** TALLAHASSEE, FL 32308

**Title:** SD  
**Name:** WRIGHT, NANCY  
**Address:** 1804 MICCOSUKEE COMMONS DR., 210  
**City-St-Zip:** TALLAHASSEE, FL 32308

I hereby 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 all other like empowered.

**SIGNATURE:** NANCY WRIGHT MD

SD

08/29/2011

Electronic Signature of Signing Officer or Director

Date