## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N02000008485

Entity Name: VILLAS OF SPYGLASS, INC.

FILED Apr 12, 2006 Secretary of State

104 SANDTRAP RD., #108 12 SYGLASS DR DESTIN, FL 32550 DESTIN, FL 32550

Current Mailing Address: New Mailing Address:

 104 SANDTRAP RD., #108
 12 SYGLASS DR

 DESTIN, FL 32550
 DESTIN, FL 32550

FEI Number: 81-0574120 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: Name and Address of New Registered Agent:

PLEAT, DAVID B
104 SANDTRAP RD. #108
DESTIN, FL 32550 US
TORRES, EDDIE J
12 SPYGLASS DR.
DESTIN, FL 32550 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: EDDIE J. TORRES 04/12/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: TORRE, EDDIE Name: TORRES, EDDIE

 Address:
 43 HERON POINT CT
 Address:
 12 SPYGLASS DR.

 City-St-Zip:
 DESTIN, FL 32550
 City-St-Zip:
 DESTIN, FL 32550

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: SIMS, GARY Name: BENITONE, DONNA

 Address:
 108 BEACH DRIVE WEST
 Address:
 34 SPYGLASS DR.

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 DESTIN, FL 32550

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

 Name:
 HYATT, RICHARD
 Name:
 ANDREA, FARRELL

 Address:
 4360 STONEBRIDGE ROAD, UNIT 101
 Address:
 245 SWEETWATER RUN

 City-St-Zip:
 DESTIN, FL 32550
 City-St-Zip:
 NICEVILLE, FL 32578

Title: ( ) Delete Title: D ( ) Change (X) Addition

 Name:
 Name:
 ELIZABETH, TORRES

 Address:
 Address:
 12 SPYGLASS DR.

 City-St-Zip:
 City-St-Zip:
 DESTIN, FL 32550

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: ELIZABETH TORRES D 04/12/2006