

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02996

FILED
Nov 29, 2006
Secretary of State

Entity Name: FIFTH AVENUE TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

742 NERITA STREET
SANIBEL, FL 33957

New Principal Place of Business:

12820 KENWOOD LANE
FORT MYERS, FL 33907

Current Mailing Address:

742 NERITA STREET
SANIBEL, FL 33957

New Mailing Address:

12820 KENWOOD LANE
FORT MYERS, FL 33907

FEI Number: 59-2448317 **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:

BIGLEY, JOSEPH S
2657 8TH AVENUE
SAINT JAMES CITY, FL 33956 US

Name and Address of New Registered Agent:

HOLLERAN, TIMOTHY
12820 KENWOOD LANE
FORT MYERS, FL 33907 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: TIMOTHY HOLLERAN

11/29/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: BIGLEY, JOSEPH S
Address: 2657 8TH AVENUE
City-St-Zip: SAINT JAMES CITY, FL 33956

Title: PD () Delete
Name: BIANCO, ANTHONY
Address: 742 NERITA STREET
City-St-Zip: SANIBEL, FL 33957

Title: D () Delete
Name: OCCIRON, MICHELLE
Address: 9360 ALLANANDER CT, # 504
City-St-Zip: FORT MYERS, FL 33919 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOLLERAN, TIMOTHY
Address: 2043 SE 28TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904

Title: SD (X) Change () Addition
Name: SOUTH, ROBERT
Address: 5304 COCOA COURT
City-St-Zip: CAPE CORAL, FL 33904

Title: D (X) Change () Addition
Name: BRADLEY, WILLIAM
Address: 2836 SILVERLEAF LANE
City-St-Zip: NAPLES, FL 34105 US

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: TIMOTHY HOLLERAN

PD

11/29/2006

Electronic Signature of Signing Officer or Director

Date