2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 19, 2004
Secretary of State

DOCUMENT# N03000000661

Entity Name: ABACOA WK5 NORTH PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3801 PGA BOULEVARD
SUITE 600
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

3801 PGA BOULEVARD
SUITE 600
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 65-1174178 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

REGSERV CORP.
3801 PGA BOULEVARD
SUITE 600
PALM BEACH GARDENS, FL 33410 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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DISALVO, PATRICK J
Address: 3801 PGA BOULEVARD SUITE 600
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SVD ( ) Delete
Name: DIAMOND, LAWRENCE J
Address: 3801 PGA BOULEVARD SUITE 600
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SVD ( ) Delete
Name: NOTO, MICHAEL A
Address: 3801 PGA BOULEVARD SUITE 600
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: EVANS, JOHN D
Address: 3801 PGA BOULEVARD SUITE 600
City-St-Zip: PALM BEACH GARDENS, FL 33410

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN D. EVANS PD 11/19/2004

Electronic Signature of Signing Officer or Director — Date