

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N03000006041 1. Entity Name PALM ISLES CONDOMINIUM NO. 1 ASSOCIATION, INC.					
Principal Place of Business 97 PALM ISLES BLVD PUNTA GORDA, FL 33950			Mailing Address 97 PALM ISLES BLVD PUNTA GORDA, FL 33950		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address 4501 Tamiami Tr. No # 300 Naples City & State Zip FL 34103		<div style="display: flex; justify-content: space-around;"> <div> FILED 05 AUG 26 PM 5:17 SECRETARY OF STATE TALLAHASSEE, FLORIDA </div> <div> REINSTATEMENT 04-05 </div> </div>	
4. FEI Number 33-1122944		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent MERKIN, STEWART A 444 BRICKELL AVE STE 300 MIAMI, FL 33131			7. Name and Address of New Registered Agent Name Stock Community Services LLC Street Address (P.O. Box Number is Not Acceptable) 4501 Tamiami Trail No. # 300 City Naples FL Zip Code 34103		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>SANDRA HOULDSWORTH</u> 8-15-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$122.50		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MERKIN, STEWART A 444 BRICKELL AVE STE 300 MIAMI, FL 33131	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO Sandy Houldsworth 4501 Tamiami Tr No, #300 Naples, FL 34103	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD QUINTANA, ELIA C 444 BRICKELL AVE STE 300 MIAMI, FL 33131	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST D Valerie Schechinger 4501 Tamiami Tr. No, #300 Naples, FL 34103	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STORM, CATHY 2950 W MARION AVE PUNTA GORDA, FL 33950	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP D Blaine Spivey 4501 Tamiami Tr. No, #300 Naples, FL 34103	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	500059017935 08/26/05--01043--001 **122.50	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Valerie Schechinger</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			8/16/05 (239)592-7344 <small>Date Daytime Phone #</small>		