

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000006548

FILED
Nov 01, 2007
Secretary of State

Entity Name: FRA-MAR ACRES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

104 NW 7TH AVENUE
OKEECHOBEE, FL 34972

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 536
OKEECHOBEE, FL 34973

New Mailing Address:

FEI Number: 56-2462530

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUCKER, BRANDON
104 NW 7TH AVENUE
OKEECHOBEE, FL 34972 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: BRANDON TUCKER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BRADY, FRANK
Address: PO BOX 536
City-St-Zip: OKEECHOBEE, FL 34973

Title: D, () Delete
Name: BRADY, MARILYN
Address: PO BOX 536
City-St-Zip: OKEECHOBEE, FL 34973

Title: D () Delete
Name: TUCKER, BRANDON
Address: 104 NW 7TH AVENUE
City-St-Zip: OKEECHOBEE, FL 34972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: MARILYN BRADY

D

11/01/2007

Electronic Signature of Signing Officer or Director

Date