

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000000597

FILED
Nov 03, 2008
Secretary of State

Entity Name: BLOOMING GROVE ESTATES SUBDIVISION ASSOCIATION, INC.

Current Principal Place of Business:

3752 AZALEA LN
SARASOTA, FL 34240

New Principal Place of Business:

3804 AZALEA LN
SARASOTA, FL 34240

Current Mailing Address:

3752 AZALEA LN
SARASOTA, FL 34240

New Mailing Address:

3804 AZALEA LN
SARASOTA, FL 34240

FEI Number: 20-3424078

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, ROBERT L
227 NOKOMIS AVE S
VENICE, FL 34285 US

Name and Address of New Registered Agent:

MIKE, TISDALE P
3804 AZALEA LANE
SARASOTA, FL 34240 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: MIKE TISDALE

11/03/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: THOMSEN, DAVID
Address: 3752 AZALEA LN
City-St-Zip: SARASOTA, FL 34240

Title: DV () Delete
Name: THOMSEN, MICHELLE
Address: 3752 AZALEA LN
City-St-Zip: SARASOTA, FL 34240

Title: DST (X) Delete
Name: TISDALE, MICHAEL
Address: 3752 AZALEA LN
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TR (X) Change () Addition
Name: TISDALE, MIKE
Address: 3804 AZALEA LN
City-St-Zip: SARASOTA, FL 34240

Title: PR (X) Change () Addition
Name: THOMSEN, DAVID
Address: 3752 AZALEA LN
City-St-Zip: SARASOTA, FL 34240

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: MIKE TISDALE

TR

11/03/2008

Electronic Signature of Signing Officer or Director

Date