

2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000004096

FILED
Apr 05, 2013
Secretary of State

Entity Name: SALISBURY ROAD LAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4237 SALISBURY ROAD
BUILDING 1 SUITE 100
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

4237 SALISBURY ROAD
BUILDING 1 SUITE 100
JACKSONVILLE, FL 32216

New Mailing Address:

4540 SOUTHSIDE BLVD
402
JACKSONVILLE, FL 32216

FEI Number: 42-1630437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMENTROUT, WILLIAM
4237 SALISBURY ROAD
SUITE 409
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

ARMENTROUT, WILLIAM
4237 SALISBURY ROAD
BUILDING 4 SUITE 409
JACKSONVILLE, FL 32216 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: WILLIAM ARMENTROUT

04/05/2013

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MUYRES, DAVID
Address: 1409 KINGSEY AVENUE BLDG. 2
City-St-Zip: ORANGE PARK, FL 32073

Title: STD
Name: VAN WINKEL, ROBERT
Address: 4237 SALISBURY RD N #409
City-St-Zip: JACKSONVILLE, FL 32216

Title: DIR
Name: BUTTNER, IV, EDWARD W
Address: 4237 SALISBURY ROAD #100
City-St-Zip: JACKSONVILLE, FL 32216

Title: DIR
Name: SALDUTTI, JIM
Address: 4237 SALISBURY ROAD BLDG 2
City-St-Zip: JACKSONVILLE, FL 32216

Title: DIR
Name: MARVIN, MALCOLM
Address: 4237 SALISBURY ROAD BLDG 3
City-St-Zip: JACKSONVILLE, FL 32216

Title: DIR
Name: ARMENTROUT, WILLIAM
Address: 4237 SALISBURY ROAD ST 409
City-St-Zip: JACKSONVILLE, FL 32216

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM ARMENTROUT

DIR

04/05/2013

Electronic Signature of Signing Officer or Director

Date