2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000004415

FILED Apr 28, 2006 Secretary of State

Entity Name: ANASTASIA ISLAND TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1730 A1A SOUTH 825 ANASTASIA BLVD ST. AUGUSTINE, FL 32080 ST. AUGUSTINE, FL 32080 **Current Mailing Address: New Mailing Address:** 1730 A1A SOUTH 5495 A1A SOUTH ST. AUGUSTINE, FL 32080 ST. AUGUSTINE, FL 32080 FEI Number: 20-1974501 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: (TIM) CHIU, YAO-TYNG TUTEN, DENA 1730 A1A SOUTH 5495 A1A SOUTH ST. AUGUSTINE, FL 32080 ST. AUGUSTINE, FL 32080 US 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: DENA TUTEN 04/28/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition (TIM) CHIU, YAO-TYNG BOOMER, DOUG Name: Name: 1730 A1A SOUTH Address: 3542 SHELDON ROAD Address: City-St-Zip: ST. AUGUSTINE, FL 32080 City-St-Zip: ORANGE PARK, FL 32065 Title: () Delete Title: (X) Change () Addition CHIU, JOLANDE Name: FINLAY, DAVID Name: Address: 1730 A1A SOUTH Address: 206 RAINTREE TRAIL ST. AUGUSTINE, FL 32080 City-St-Zip: City-St-Zip: ST. AUGUSTINE, FL 32086 Title: () Delete Title: (X) Change () Addition CHIU, RAY THOMPSON, CLAUDIA Name: Name: 1730 A1A SOUTH Address: Address: P. O. BOX 9 City-St-Zip: ST. AUGUSTINE, FL 32080 City-St-Zip: HOLLISTER, FL 32147 Title: () Delete Title: () Change (X) Addition Name: Name: RERISI, JAMES Address: Address: 3290 U.S. 1 SOUTH City-St-Zip: City-St-Zip: ST. AUGUSTINE, FL 32086 Title: () Delete Title: () Change (X) Addition SMITH, DARRELL Name: Name: 637 CR 13 Address: Address: City-St-Zip: City-St-Zip: ST. AUGUSTINE, FL 32092

I hereby certify that the information supplied with this filing does not qualify for the 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: DOUG BOOMER P 04/28/2006