2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0400006503

FILED Jan 05, 2007 Secretary of State

Entity Name: MARBELLA TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2613 W HORATIO ST 2617 W HORATIO ST

UNIT B UNIT B

TAMPA, FL 33609 TAMPA, FL 33609

Current Mailing Address: New Mailing Address:

2613 W HORATIO ST 2617 W HORATIO ST

UNIT B UNIT B

TAMPA, FL 33609 TAMPA, FL 33609

FEI Number: 20-1588193 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:

MICHEALS, MATTHEW
2612 W HORATIO ST
UNIT B

MICHAELS, MATTHEW
2617 W HORATIO ST
UNIT B

UNIT B

TAMPA, FL 33609 US TAMPA, FL 33609 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: MATTHEW MICHAELS 01/05/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: MICHALS, MATTHEW Name: MICHAELS, MATTHEW

Address: 2617 HORATIO ST UNIT B
City-St-Zip: TAMPA, FL 33609

Address: City-St-Zip: TAMPA, FL 33609

Title: DVP () Delete Title: DVP (X) Change () Addition

 Name:
 PUGLIESE, SANDRA
 Name:
 PUGLIESE, SANDRA

 Address:
 2617 A W HORATIO ST
 Address:
 2617 W HORATIO ST UNIT A

 City-St-Zip:
 TAMPA, FL 33609
 City-St-Zip:
 TAMPA, FL 33609

Title: DT () Delete Title: () Change () Addition

Name: PATENT, ALEX Name:

Address: 2615 W HORATIO ST UNIT A Address: City-St-Zip: TAMPA, FL 33609 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

Name: WELLS, JUDITH Name: WELLS, JUDITH

Address: 2615 W HORATIO ST UNIT V Address: 2615 W HORATIO ST UNIT B

City-St-Zip: TAMPA, FL 33609 City-St-Zip: TAMPA, FL 33609

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: MATTHEW MICHAELS DP 01/05/2007