## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000010588

FILED Nov 22, 2006 Secretary of State

Entity Name: THE VILLAGE AT DOLPHIN COMMERCE CENTER OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

5201 BLUE LAGOON DRIVE, SUITE 881 MIAMI, FL 33126

10821 NW 122 ST MEDLEY, FL 33178

**Current Mailing Address:** 

New Mailing Address:

5201 BLUE LAGOON DRIVE, SUITE 881 MIAMI, FL 33126

10821 NW 122 ST MEDLEY, FL 33178

FFI Number:

FEI Number Applied For (X) 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:

FARKAS', KENNETH 5201 BLUE LAGOON DR FARKAS, KENNETH 15752 SW 15TH ST

SUITE 881 MIAMI, FL 33126 US

US DAVIE, FL 33326

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: KENNETH FARKAS

11/22/2006

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

() Change () Addition

() Delete

FARKAS, KENNETH Name:

Address: 5201 BLUE LAGOON DRIVE, SUITE 881

City-St-Zip: MIAMI, FL 33126

Title: (X) Delete Name: LEWIS, HAROLD L

Address: 5201 BLUE LAGOON DRIVE. SUITE 881

City-St-Zip: MIAMI, FL 33126 Title:

**PRES** 

FARKAS, KENNETH

15752 SW 15TH ST

**DAVIE, FL 33326** 

Name: Address: City-St-Zip:

Name:

Address:

City-St-Zip:

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: KENNETH FARKAS **PRES** 11/22/2006

Electronic Signature of Signing Officer or Director

Date