PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

CORPORATION



FLORIDA DEPARTMENT OF STATE Secretary of State

KEIN	SIAIEM	ENI		DIVI	SION OF C	ORPOR	RATIONS		(09 APR 28 AM 10:	14		
DOCUMENT # No4298 1. Corporation Name									09 APR 28 AM 10: 1 L RECEIVED MAR 25 2009				
Witney Property Owners Association, Jule									ı				
					office Address k of Commerce Blvd.				500146229195 03/19/0901011022 **183.75 cr2E081 (12/08)				
Suite, Apt. #, etc. Suite, Apt. #,					etc.				4. Date Incorporated or Qualified To Do Business in Florida 7/20/1984				
City & State Boca Raton City & State Boca Raton					on				5. FEI Number Applied For 592481721 Not Applicable				
Zip 33487		Country	,	Zip 33487		Cour	ntry		6. CERTIFICATI			onal Fee required	
7. Name and Address of Current Registered Agent													
Name Dave Fendrick									The reinstatement fee is imposed, except in circumstances which the entity did not receive				
Street Address (P.O. Box Number is Not Acceptable) 15484 Lakes of Delray Blvd.								the prior notices. By checking this box, you are certifying the prior notices were not					
Suite, Apt. #, Etc. 206										received and requesting the reinstatement fee be waived.			
city Delray Beach						State							
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN Date PARIL 152009												009	
9. Names	and Street Ad	dresses	of Each Officer and			-	orations must	list at lea	est 3 directors)				
Titles	Name of Officers and/or Directors					Street Address of Each Officer and/or Director				City / State / Zip			
Pres/T	Dave Fendrick				15484 Lakes of Delray Blvd.				. #206	Delray Beach, Fl 33484			
VP	Sonny Shull				15484 Lakes of Delray Blvd.				. #204	Delray Beach, Fl 33484			
Sec	Judy Fial				15488 Lakes of Delray Blvd.				. #106	Delray Beach, Fi 33484			
Dir	Lou Smith				15496 Lakes of Delray Blvd				.#203	Delray Beach, FI 33484			
Dir	Max Kra	vitz	NSTA	15484	15484 Lakes of Delray Blvd.				#202 Delray Beach, Fl 33484				
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10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR