

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N04445

**FILED**  
**May 21, 2012**  
**Secretary of State**

**Entity Name:** PARK PLACE CONDOMINIUM OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

31 PARK CIR.  
FT. WALTON BEACH, FL 32548 US

**New Principal Place of Business:**

**Current Mailing Address:**

110 PERRY AVE  
FORT WALTON BEACH, FL 32548 US

**New Mailing Address:**

**FEI Number:** 59-2504171

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PARK PLACE CONDO ASSN C/O LAURA B WRIGHT  
CONDO ASSN MANAGER  
110 PERRY AVE  
FT WALTON, FL 32548 US

**Name and Address of New Registered Agent:**

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:** LAURA B. WRIGHT

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** FISHER, ROBERT W  
**Address:** C/O 110 PERRY AVE  
**City-St-Zip:** FT WALTON, FL 32548

**Title:** D  
**Name:** DAGWELL, SCOT  
**Address:** C/O 110 PERRY AVE.  
**City-St-Zip:** FORT WALTON BEACH, FL 32548

**Title:** D  
**Name:** FOSTER, MARGARET  
**Address:** C/O 110 PERRY AVE  
**City-St-Zip:** FORT WALTON BEACH, FL 32548

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:** ROBERT W. FISHER

PRES

05/21/2012

Electronic Signature of Signing Officer or Director

Date