

2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000544

FILED
Dec 18, 2012
Secretary of State

Entity Name: SUMMERLIN DENTAL LAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5285 SUMMERLIN RD., SUITE 402
FT. MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

5285 SUMMERLIN RD., SUITE 402
FT. MYERS, FL 33907

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, JAMES A
5285 SUMMERLIN RD., SUITE 402
FT. MYERS, FL 33907 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: JAMES A. MITCHELL

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: MITCHELL, JAMES A
Address: 5285 SUMMERLIN ROAD, SUITE 402
City-St-Zip: FORT MYERS, FL 33907 US

Title: D
Name: MITCHELL, YOLANDA F
Address: 5285 SUMMERLIN ROAD, SUITE 402
City-St-Zip: FORT MYERS, FL 33907 US

Title: D
Name: DERAGON, CYNTHIA
Address: 5285 SUMMERLIN ROAD, SUITE 402
City-St-Zip: FORT MYERS, FL 33907 US

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: JAMES A. MITCHELL

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12/18/2012

Electronic Signature of Signing Officer or Director

Date