2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000002520

FILED Dec 03, 2009 Secretary of State

Entity Name: PARC CENTRAL AVENTURA EAST CONDOMINIUM ASSOCIATION, INC.

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

3300 NE 192 STREET AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

3300 NE 192 STREET AVENTURA, FL 33180

FEI Number: 20-4312843 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY TRIPP SCOTT

110 SE SIXTH STREET 1201 HAYS STREET

TALLAHASSEE, FL 323012525 US SUITE 1500 FT. LAUDERDALE, FL 33301 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 ZIFRONY 12/03/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition TUCKER, DON CURTIS, SHAWN Name: Name: 225 W. HUBBARD STREET #400 Address: 110 SE SIXTH STREET #1500 Address: City-St-Zip: CHICAGO, IL 60610 City-St-Zip: FT. LAUDERDALE, FL 33301 Title: () Delete Title: (X) Change () Addition STOCKING, NICK Name: SINGLETARY, JAMES Name: Address: 225 W. HUBBARD STREET #400 Address: 110 SE SIXTH STREET #1500 City-St-Zip: CHICAGO, IL 60610 City-St-Zip: FT. LAUDERDALE, FL 33301 Title: () Delete Title: (X) Change () Addition ARONS, JENNIFER ARENA, SALVATORE Name: Name:

240 EAST ILLINOIS STREET - SUITE 100 110 SE SIXTH STREET #1500 Address: Address:

City-St-Zip: CHICAGO, IL 60611 City-St-Zip: FT. LAUDERDALE, FL 33301

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

Name: NIVEN, BRIAN Name: 225 W. HUBBARD STREET #400 Address: Address: City-St-Zip: CHICAGO, IL 60610 City-St-Zip:

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

SLAVEN, ARTHUR Name: Name: 225 W. HUBBARD STREET #400 Address: Address: City-St-Zip: CHICAGO, IL 60610 City-St-Zip:

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

LERNER, MICHAEL Name: Name: Address: 1555 N. SHEFFIELD Address: CHICAGO, IL 60622 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SHAWN CURTIS Ρ 12/03/2009