2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N05000005985

Entity Name: BIG OAK RESERVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8840 NORTH HIMES AVENUE
TAMPA, FL 33614

New Principal Place of Business:

8705 SLEEPY OAK PLACE
TAMPA, FL 33614

Current Mailing Address:

8840 NORTH HIMES AVENUE
TAMPA, FL 33614

New Mailing Address:

8705 SLEEPY OAK PLACE
TAMPA, FL 33614

FEI Number: 20-3691221 **FEI Number Applied For ( )** **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:

TANKEL, ROBERT L ESQ
1022 MAIN STREET
SUITE D
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

BISHOFF, DUANE B CPA
3409 W FLETCHER AVE
TAMAPA, FL 33618 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: DUANE B BISHOFF CPA 05/01/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MALOUF, THOMAS
Address: 8840 NORTH HIMES AVENUE
City-St-Zip: TAMPA, FL 33614

Title: VPD ( ) Delete
Name: MALOUF, T J
Address: 8840 NORTH HIMES AVENUE
City-St-Zip: TAMPA, FL 33614

Title: STD ( ) Delete
Name: SCHMIDT, DAVID
Address: 8840 NORTH HIMES AVENUE
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: THOMAS MALOUF P 05/01/2008
Electronic Signature of Signing Officer or Director — Date