

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000011749

FILED  
Feb 14, 2011  
Secretary of State

**Entity Name:** MABEL LOOP RIDGE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

738 RUGBY STREET  
ORLANDO, FL 32804

**New Principal Place of Business:**

955 KELLER ROAD  
1500  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

738 RUGBY STREET  
ORLANDO, FL 32804

**New Mailing Address:**

955 KELLER ROAD  
1500  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

ROUHIER, CRAIG  
738 RUGBY STREET  
ORLANDO, FL 32804 US

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

HOWARD, SCOTT  
955 KELLER ROAD  
1500  
ALTAMONTE SPRINGS, FL 32714 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: SCOTT HOWARD

02/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: PRIOR, P. THOMAS  
Address: 955 KELLER ROAD, SUITE 1500  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DVP  
Name: GREENAWALT, THOMAS  
Address: 955 KELLER ROAD, SUITE 1500  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DST  
Name: FRIEDMAN, GEORGE  
Address: 955 KELLER ROAD, SUITE 1500  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: P. THOMAS PRIOR

PRES

02/14/2011

Electronic Signature of Signing Officer or Director

Date