

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000012802

FILED  
Nov 25, 2008  
Secretary of State

**Entity Name:** GAMBLE OAKS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

707 WASHINGTON BLVD. SOUTH  
SARASOTA, FL 34236

**New Principal Place of Business:**

50 CENTRAL AVE STE 900  
SARASOTA, FL 34236

**Current Mailing Address:**

707 WASHINGTON BLVD. SOUTH  
SARASOTA, FL 34236

**New Mailing Address:**

50 CENTRAL AVE STE 900  
SARASOTA, FL 34236

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **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:**

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

MESSICK, ROBERT E  
2033 MAIN ST., SUITE 600  
SARASOTA, FL 34237 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: ROBERT MESSICK

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BUCHANAN, ED  
Address: 707 WASHINGTON BLVD. SOUTH  
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete  
Name: NASH, GEOFF  
Address: 707 WASHINGTON BLVD. SOUTH  
City-St-Zip: SARASOTA, FL 34236

Title: D (X) Delete  
Name: TOSCH, JOHN E  
Address: 707 WASHINGTON BLVD. SOUTH  
City-St-Zip: SARASOTA, FL 34236

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BUCHANAN, ED  
Address: 50 CENTRAL AVE STE 900  
City-St-Zip: SARASOTA, FL 34236

Title: D (X) Change ( ) Addition  
Name: JOHN, TOSCH  
Address: 50 CENTRAL AVE STE 900  
City-St-Zip: SARASOTA, FL 34236

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: ED BUCHANAN

DP

11/25/2008

Electronic Signature of Signing Officer or Director

Date