

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:

MESSICK, ROBERT E
2033 MAIN ST., SUITE 600
SARASOTA, FL 34237 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: 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 Delete
Name: TOSCH, JOHN E
Address: 707 WASHINGTON BLVD. SOUTH
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D 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

Electronic Signature of Signing Officer or Director

DP

11/25/2008

Date