2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0600000104

FILED Oct 08, 2007 Secretary of State

Entity Name: HOLLENBECK TOWNHOMES OWNERS ASSOCIATION, INC.

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

600 W. MICHIGAN STREET 1830 HOLLENBECK ST ORLANDO, FL 32805 ORLANDO, FL 32806

Current Mailing Address: New Mailing Address:

600 W. MICHIGAN STREET 1830 HOLLENBECK ST ORLANDO, FL 32805 ORLANDO, FL 32806

FEI Number: 20-5480564 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: Name and Address of New Registered Agent:

WATERS, KEITH R 369 NORTH NEW YORK AVENUE THIRD FLOOR WINTER PARK, FL 32789 US

JODI, FLECK 1830 HOLLENBECK ST ORLANDO, FL 32806 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: JODI FLECK 10/08/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete RICE, EDWARD WILLIAMS, DOUGLAS A Name: Name: 600 W. MICHIGAN STREET Address: 5241 WATER VISTA DR Address: City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32821

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

PLAKIOTIS, GEORGE Name: Name: LEHMANN, JEFF Address: 600 W. MICHIGAN STREET Address: 1830 HOLLENBECK DR City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32806

() Delete Title: STD Title: **TRES** (X) Change () Addition

RICE, NINA Name: FLECK, JODI Name: Address:

600 W. MICHIGAN STREET 1830 HOLLENBECK ST Address: City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32806

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: DOUGLAS A. WILLIAMS **PRES** 10/08/2007