

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N06000001633

**FILED**  
**May 03, 2011**  
**Secretary of State**

**Entity Name:** FRUITVILLE PARK OF COMMERCE PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

7090 FRUITVILLE ROAD  
SARASOTA, FL 34240

**New Principal Place of Business:**

7520 CLAXSTRAUSS DRIVE  
SARASOTA, FL 34240

**Current Mailing Address:**

7090 FRUITVILLE ROAD  
SARASOTA, FL 34240

**New Mailing Address:**

7520 CLAXSTRAUSS DRIVE  
SARASOTA, FL 34240

**FEI Number:** 20-4552215

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VAN WINKLE, MARY E  
3859 BEE RIDGE RD.  
202  
SARASOTA, FL 34233 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:** EVERETT R CLAXTON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** CLAXTON, EVERETT R  
**Address:** 7090 FRUITVILLE ROAD  
**City-St-Zip:** SARASOTA, FL 34240

**Title:** DVST  
**Name:** STRAUSS, ROBERT J  
**Address:** 3350 RIDGEVIEW DR  
**City-St-Zip:** SARASOTA, FL 34235

**Title:** D  
**Name:** WILSON, CHARLES H  
**Address:** 8221 BLAIKIE COURT  
**City-St-Zip:** SARASOTA, FL 34240

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:** EVERETT R CLAXTON

DP

05/03/2011

Electronic Signature of Signing Officer or Director

Date