

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N06000002075

**FILED**  
**Nov 08, 2012**  
**Secretary of State**

**Entity Name:** NEWCASTLE TOWNHOMES OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

14 EAST WASHINGTON STREET - SUITE 600D  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

14 EAST WASHINGTON STREET - SUITE 600D  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 26-4419197

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THARP, GARY G  
14 EAST WASHINGTON STREET - SUITE 600D  
ORLANDO, FL 32801 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:** GARY THARP

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** THARP, GARY G  
**Address:** 14 EAST WASHINGTON STREET - SUITE 600D  
**City-St-Zip:** ORLANDO, FL 32801

**Title:** VPD  
**Name:** SPENCE, STEWART  
**Address:** 14 EAST WASHINGTON STREET - SUITE 600D  
**City-St-Zip:** ORLANDO, FL 32801

**Title:** SD  
**Name:** RICK, MOLERO  
**Address:** 14 EAST WASHINGTON STREET - SUITE 600D  
**City-St-Zip:** ORLANDO, FL 32801

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:** GARY THARP

PD

11/08/2012

Electronic Signature of Signing Officer or Director

Date