

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000002820

FILED
Mar 07, 2008
Secretary of State

Entity Name: SOMERVILLE AT SANDOVAL SECTION II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9148 BONITA BEACH ROAD STE 102
BONITA SPRINGS, FL 34135

New Principal Place of Business:

2607 SOMERVILLE LOOP RD.
CAPE CORAL, FL 33991

Current Mailing Address:

9148 BONITA BEACH ROAD STE 102
BONITA SPRINGS, FL 34135

New Mailing Address:

C/O SILVERCRESTED MANAGEMENT, LLC
PO BOX 1848
FT. MYERS, FL 33902

FEI Number: 20-4798981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STACKHOUSE, EDWIN D
9148 BONITA BEACH ROAD STE 102
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

SILVERCRESTED MANAGEMENT, LLC
3440 MARINATOWN LN
NORTH FORT MYERS, FL 33903 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: LEE J. VAN TILBURG

03/07/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: STACKHOUSE, EDWIN D
Address: 9148 BONITA BEACH ROAD STE 102
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DV () Delete
Name: MCCORMICK, RICHARD
Address: 9148 BONITA BEACH ROAD STE 102
City-St-Zip: BONITA SPRINGS, FL 34135

Title: DST () Delete
Name: RAY, LAURA
Address: 9148 BONITA BEACH ROAD STE 102
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: D'ALESSANDRO, JOSEPH
Address: 218 WEST ARCTIC AVENUE
City-St-Zip: MINOLTA, NJ 08341

Title: VP (X) Change () Addition
Name: DIDONATO, ALBERT
Address: 2631 SOMERVILLE LOOP #701
City-St-Zip: CAPE CORAL, FL 33991

Title: ST (X) Change () Addition
Name: RODGERS, JAMIE
Address: 2632 SOMERVILLE LOOP #1702
City-St-Zip: CAPE CORAL, FL 33991

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: JOSEPH D'ALESSANDRO

P

03/07/2008

Electronic Signature of Signing Officer or Director

Date