2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000003585

FILED Sep 30, 2009 Secretary of State

Entity Name: COUNTRY WALK AT ALTAMONTE SPRINGS CONDOMINIUM ASSOCIATION, INC.

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

233 COUNTRY WALK PLACE ALTAMONTE SPRINGS, FL 32701

Current Mailing Address: New Mailing Address:

233 COUNTRY WALK PLACE ALTAMONTE SPRINGS, FL 32701

FEI Number: 20-4993025 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PEREZ, AGUSTIN J SANDINO, CARLOS

233 COUNTRY WALK PLACE 233 COUNTRY WALK PLACE

ALTAMONTE SPRINGS, FL 32701 US ALTAMONTE SPRINGS, FL 32701 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: CARLOS SANDINO 09/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: P (X) Change() Addition

 Name:
 PEREZ, AGUSTIN
 Name:
 MAX, PEDRO

 Address:
 233 COUNTRY WALK PLACE
 Address:
 233 COUNTRY WALK PLACE

 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701
 City-St-Zip:
 ALTAMONTE SPRINGS, FL 32701

Title: VPD () Delete Title: VP (X) Change () Addition

Name:CANTENS, GASTONName:REAY, JUSTINAddress:233 COUNTRY WALK PLACEAddress:233 COUNTRY WALK PLACE

City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: TD () Delete Title: T (X) Change () Addition Name: RODRIGUEZ, MANUEL Name: SANDINO, CARLOS

Address: 233 COUNTRY WALK PLACE Address: 233 COUNTRY WALK PLACE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: SD () Delete Title: S (X) Change () Addition

Name:MONTERO, ARMANDOName:SANDINO, CARLOSAddress:233 COUNTRY WALK PLACEAddress:233 COUNTRY WALK PLACECity-St-Zip:ALTAMONTE SPRINGS, FL 32701City-St-Zip:ALTAMONTE SPRINGS, FL 32701

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: CARLOS SANDINO S 09/30/2009