2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000004571

FILED Apr 28, 2008 Secretary of State

Entity Name: LAS BRISAS RSYT CONDOMINIUM ASSOCIATION, INC.

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

17715 GULF BLVD. 17735 GULF BLVD

REDINGTON SHORES, FL 33708 REDINGTON SHORES, FL 33708

Current Mailing Address: New Mailing Address:

17715 GULF BLVD. 352 150TH AVE.

REDINGTON SHORES, FL 33708 STE E MADEIRA BEACH, FL 33708

FEI Number: 20-4766630 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:

ARSENAULT, KENNETH G. JR. CONDO MANAGEMENT PLUS, INC. 10225 ULMERTON RD., STE. 2 352 150TH AVE.

LARGO, FL 33771 US STE. E
MADEIRA BEACH, FL 33708 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: JOYCE ADAMS 04/28/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DP () Delete Title: DP (X) Change () Addition

 Name:
 LYONS, ROBERT E.
 Name:
 PAGE, EVELYN

 Address:
 P.O. BOX 1834
 Address:
 352 150TH AVE. STE. E

 City-St-Zip:
 LARGO, FL 33779
 City-St-Zip:
 MADEIRA BEACH, FL 33708

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

 Name:
 PAGE, STEPHEN J.
 Name:
 DIMAS, CHRISTIAN

 Address:
 20001 GULF BLVD.. STE. 5
 Address:
 352 150TH AVE. STE. E

Address: 20001 GULF BLVD., STE. 5 Address: 352 150TH AVE. STE. E

City-St-Zip: INDIAN SHORES, FL 33785 City-St-Zip: MADEIRA BEACH, FL 33708

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

 Name:
 PAGE, EVELYN V.
 Name:
 SEITZ, ROBERT

 Address:
 20001 GULF BLVD., STE. 5
 Address:
 352 150TH AVE. STE E

 City-St-Zip:
 INDIAN SHORES, FL 33785
 City-St-Zip:
 MADEIRA BEACH, FL 33708

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: JOYCE ADAMS RA 04/28/2008