

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000004989

FILED
Sep 29, 2009
Secretary of State

Entity Name: BELFAIR PARK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 24282
TAMPA, FL 33623

New Principal Place of Business:

4010 W. STATE STREET
201
TAMPA, FL 33609

Current Mailing Address:

PO BOX 24282
TAMPA, FL 33623

New Mailing Address:

FEI Number: 20-4880090 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

STERN, ROBERT G ESQ
101 E KEBBEDY BLVD
BANK OF AMERICAN PLAZA, STE 2700
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

STERN, ROBERT G ESQ
101 E KENNEDY BLVD
BANK OF AMERICAN PLAZA, STE 2700
TAMPA, FL 33606 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: ROBERT G STERN

09/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CISNEROS, FRANK G JR
Address: PO BOX 24282
City-St-Zip: TAMPA, FL 33623

Title: D () Delete
Name: CISNEROS, FRANK G
Address: PO BOX 24282
City-St-Zip: TAMPA, FL 33623

Title: D () Delete
Name: CISNEROS, J. CARLOS
Address: PO BOX 24282
City-St-Zip: TAMPA, FL 33623

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: FRANK G. CISNEROS JR.

D

09/29/2009

Electronic Signature of Signing Officer or Director

Date