

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000005868

FILED
Nov 12, 2008
Secretary of State

Entity Name: CREPE MYRTLE CONDOMINIUM HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2575 CYPRESS POINT CIRCLE
NAVARRE, FL 32566

New Principal Place of Business:

Current Mailing Address:

2575 CYPRESS POINT CIRCLE
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 20-4876827 **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:

HALL, LEE
2575 CYPRESS POINT CIRCLE
NAVARRE, FL 32566 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: LEE HALL

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCDONOUGH, KEVIN
Address: UNIT 4116
City-St-Zip: APO, AA 34033

Title: VD () Delete
Name: MCDONOUGH, ROSE
Address: UNIT 4116
City-St-Zip: APO, AA 34033

Title: SD () Delete
Name: MCDONOUGH, KEVIN II
Address: UNIT 4116
City-St-Zip: APO, AA 34033

Title: TD () Delete
Name: MCDONOUGH, WILLIAM
Address: UNIT 4116
City-St-Zip: APO, AA 34033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCDONOUGH, KEVIN
Address: 11422 SEYMOUR LANE
City-St-Zip: SPOTSYLVANIA, VA 22553

Title: VD (X) Change () Addition
Name: MCDONOUGH, ROSE
Address: 11422 SEYMOUR LANE
City-St-Zip: SPOTSYLVANIA, VA 22553

Title: SD (X) Change () Addition
Name: MCDONOUGH, KEVIN II
Address: 11422 SEYMOUR LANE
City-St-Zip: SPOTSYLVANIA, VA 22553

Title: TD (X) Change () Addition
Name: MCDONOUGH, WILLIAM
Address: 11422 SEYMOUR LANE
City-St-Zip: SPOTSYLVANIA, VA 22553

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: KEVIN MCDONOUGH

PD

11/12/2008

Electronic Signature of Signing Officer or Director

Date