2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 11, 2009
Secretary of State

DOCUMENT# N06000005994

Entity Name: THE A.G. PARADISE TOWNHOMES I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

160 BOWIE LANE
APT #4
KISSIMMEE, FL 34743

New Principal Place of Business:

4913 OAKWAY DRIVE
ST CLOUD, FL 34771

Current Mailing Address:

C/O H&S MANAGEMENT
PO-BOX 450326
KISSIMMEE, FL 34745

New Mailing Address:

YEDA MULTISERVICES
4913 OAKWAY DR
ST CLOUD, FL 34771

FEI Number: 41-2237045 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

OLIVERAS, REBECCA
160 BOWIE LANE
APT #4
KISSIMMEE, FL 34743 US

Name and Address of New Registered Agent:

MARIA, SANTOS
4913 OAKWAY DR
ST CLOUD, FL 34771 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: MARIA SANTOS 11/11/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: OLIVERAS, REBECCA
Address: 160 BOWIE LANE APT #4
City-St-Zip: KISSIMMEE, FL 34743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: REBECA OLIVERAS P 11/11/2009
Electronic Signature of Signing Officer or Director — Date