

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000006212

FILED
Oct 22, 2007
Secretary of State

Entity Name: TOWNHOUSES OF CORAL SPRINGS INC.

Current Principal Place of Business:

11590 NW 45TH STREET
CORAL SPRINGS, FL 33065

New Principal Place of Business:

3881 NW 100 AVENUE
CORAL SPRINGS, FL 33065

Current Mailing Address:

11590 NW 45TH STREET
CORAL SPRINGS, FL 33065

New Mailing Address:

3881 NW 100 AVENUE
CORAL SPRINGS, FL 33065

FEI Number: 20-5621508 **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:

JOSEPH, JOYCE
11590 NW 45TH STREET
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

LION PROPERTY MANAGEMENT
3881 NW 100 AVENUE
CORAL SPRINGS, FL 33065 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: SIMONA ANGELO

10/22/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOSEPH, CHARLES
Address: 11590 NW 45TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VPD () Delete
Name: JOSEPH, JOYCE
Address: 11590 NW 45TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TD () Delete
Name: GRASMAN, DAVID
Address: 11594 NW 45TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SD (X) Delete
Name: PADILLA, MARIE
Address: 11592 NW 45TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MAGNICARI, MARIE
Address: 11592 NW 45TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VPD (X) Change () Addition
Name: JOSEPH, CHARLES
Address: 11590 NW 45TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TD/S (X) Change () Addition
Name: JOSEPH, JOYCE
Address: 11590 NW 45TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

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: SIMONA ANGELO

MGR

10/22/2007

Electronic Signature of Signing Officer or Director

Date