

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N06000007558 1. Entity Name CASTELLINA HOMEOWNERS' ASSOCIATION, INC.						2008 DEC 18 PM 12:26 12/18/08  REINSTATEMENT 11041 REIN IN 099 (1/07) 68	
Principal Place of Business 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426				Mailing Address 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426			
2. Principal Place of Business - No P.O. Box #				3. Mailing Address			
Suite, Apt. #, etc.				Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number APPLIED FOR						Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐						\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
ASHBY, STEVEN 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426				Name Kevin Borkenhagen Street Address (P.O. Box Number is Not Acceptable) 3301 Quantum Blvd., 1st Floor City Boynton Beach FL Zip Code 33426			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable.				DATE 11/5/08 (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$61.25 After January 1, 2009, Fee will be \$122.50				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORKENHAGEN, KEVIN 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426 ☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 000138875340 12/10/08--01026--006 **\$1.25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ASHBY, STEVE 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition DIRECTOR HEATHER OVERMYER 3301 QUANTUM BLVD., 1ST FL BOYNTON BEACH, FL 33426		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REYNOLDS, MIKE 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition DIRECTOR STEVE SVODA 3301 QUANTUM BLVD., 1ST FLOOR BOYNTON BEACH, FL 33426		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YUTER, RONALD 123 NW 13TH STREET BOCA RATON, FL 33432 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RUSSELL, TAD 123 NW 13TH STREET BOCA RATON, FL 33432 ☒ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date 12/15/08 Daytime Phone # 561-526-1022			