## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N06000008594

FILED Jul 07, 2008 Secretary of State

Entity Name: ESTATES AT UNIVERSITY GROVES ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2801 FRUITVILLE ROAD SUITE 100 3301 WHITFIELD AVENUE SARASOTA, FL 34237 SARASOTA, FL 34243

Current Mailing Address: New Mailing Address:

2801 FRUITVILLE ROAD SUITE 100 3301 WHITFIELD AVENUE SARASOTA, FL 34237 SARASOTA, FL 34243

FEI Number: 20-5678885 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: Name and Address of New Registered Agent:

BARNEBEY, MARK P 1301 SIXTH AVENUE WEST SUITE 401 BRADENTON, FL 34205 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: MARK P. BARNEBY

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: D (X) Change () Addition

Name: CAMP, HOWARD B
Address: 2801 FRUITVILLE ROAD SUITE 100
Address: 3301 WHITFIELD AVENUE

City-St-Zip: SARASOTA, FL 34237 City-St-Zip: SARASOTA, FL 34243

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: NELSON, ROBERT R Name: NELSON, ROBERT R

Address: 2801 FRUITVILLE ROAD SUITE 100 Address: 3301 WHITFIELD AVENUE City-St-Zip: SARASOTA, FL 34237 City-St-Zip: SARASOTA, FL 34243

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

Name:SHARP, III, LEMUELName:SHARP, III, LEMUELAddress:2801 FRUITVILLE ROAD SUITE 100Address:3301 WHITFIELD AVENUECity-St-Zip:SARASOTA, FL 34237City-St-Zip:SARASOTA, FL 34243

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: HOWARD B. CAMP D 07/07/2008