2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000008898

FILED Oct 01, 2008 Secretary of State

Entity Name: VILLA CAMBRIA CONDOMINIUM ASSOCIATION, INC.

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

4400 WEST SAMPLE ROAD STE 200 COCONUT CREEK, FL 330733450

Current Mailing Address: New Mailing Address:

4400 WEST SAMPLE ROAD STE 200 COCONUT CREEK, FL 330733450

FEI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent:

MINTO ARTESIA, LLC ATTN: HARRY L. POSIN 4400 WEST SAMPLE ROAD STE 200 COCONUT CREEK, FL 330733450 US POSIN, HARRY L 4400 W SAMPLE ROAD, STE 200 COCONUT CREEK, FL 330733450 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: HARRY POSIN 10/01/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: () Change () Addition

 Name:
 BEER, T.R.
 Name:

 Address:
 4400 WEST SAMPLE ROAD STE 200
 Address:

 City-St-Zip:
 COCONUT CREEK, FL 330733450
 City-St-Zip:

Title: STD () Delete Title: STD (X) Change () Addition

Name: GUADAGNO, CORY Name: RODGERS, FRANK

 Address:
 4400 WEST SAMPLE ROAD STE 200
 Address:
 4400 WEST SAMPLE ROAD STE 200

 City-St-Zip:
 COCONUT CREEK, FL 330733450
 City-St-Zip:
 COCONUT CREEK, FL 330733450

 $\label{eq:title:title:DV} \textit{Title:} \qquad \textit{VD} \qquad \textit{()} \; \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{DV} \qquad \textit{(X)} \; \textit{Change ()} \; \textit{Addition}$

Name: LONG, THOMAS Name: LONG, THOMAS

Address: 4400 WEST SAMPLE ROAD STE 200 Address: 4400 WEST SAMPLE ROAD STE 200 City-St-Zip: COCONUT CREEK, FL 330733450 City-St-Zip: COCONUT CREEK, FL 330733450

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: THOMAS LONG DV 10/01/2008