

# 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000010251

FILED  
Aug 06, 2012  
Secretary of State

**Entity Name:** TERRAVERDE 27 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O GREAT LAKES HOMES OF SW FL, INC.  
5280 MYTRLE LANE  
NAPLES, FL 34113

**New Principal Place of Business:**

C/O TROPICAL ISLES MANAGEMENT  
12734 KENWOOD LANE, SUITE 49  
FORT MYERS, FL 33907

**Current Mailing Address:**

C/O GREAT LAKES HOMES OF SW FL, INC.  
5280 MYTRLE LANE  
NAPLES, FL 34113

**New Mailing Address:**

C/O TROPICAL ISLES MANAGEMENT  
12734 KENWOOD LANE, SUITE 49  
FORT MYERS, FL 33907

**FEI Number:** 20-5685220

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COLSON, KARIN A  
C/O GREAT LAKES HOMES OF SW FL, INC.  
5280 MYTRLE LANE  
NAPLES, FL 34113 US

**Name and Address of New Registered Agent:**

TROPICAL ISLES MANAGEMENT SERVICES  
12734 KENWOOD LANE  
SUITE 49  
FORT MYERS, FL 33907 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: DONALD ROEDDING

08/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MCCLURE, STEPHEN C  
Address: 12734 KENWOOD LANE, SUITE 49  
City-St-Zip: FORT MYERS, FL 33907

I hereby 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 all other like empowered.

SIGNATURE: STEPHEN C. MCCLURE

PRES

08/06/2012

Electronic Signature of Signing Officer or Director

Date