

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000012178

FILED
Jun 25, 2008
Secretary of State

Entity Name: LAKE'S EDGE PLAZA SIX CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

113 E 13TH ST
ST CLOUD, FL 34769

New Principal Place of Business:

131 E 13TH STREET
ST CLOUD, FL 34769

Current Mailing Address:

113 E 13TH ST
ST CLOUD, FL 34769

New Mailing Address:

131 E 13TH STREET
ST CLOUD, FL 34769

FEI Number: 20-5993172 **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:

BRINSON, HAYNES E
104 N CHURCH ST
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

SAMPSON, KENNETH
131 E 13TH STREET
ST CLOUD, FL 34769 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: KENNETH SAMPSON

06/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAMPSON, KEN
Address: 113 E 13TH ST
City-St-Zip: ST CLOUD, FL 34769

Title: SD () Delete
Name: BRINSON, HAYNES E
Address: 104 N CURCH ST
City-St-Zip: KISSIMMEE, FL 34741

Title: D (X) Delete
Name: MARK, TANIA S
Address: 113 E 13TH ST
City-St-Zip: ST CLOUD, FL 34769

Title: T (X) Delete
Name: THEOBALD, KARL-HEINZ
Address: 113 E 13TH ST
City-St-Zip: ST CLOUD, FL 34769

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAMPSON, KENNETH
Address: 131 E 13TH STREET
City-St-Zip: ST CLOUD, FL 34769

Title: SD (X) Change () Addition
Name: KARL-HEINZ, THEOBALD
Address: 131 E 13TH STREET
City-St-Zip: ST CLOUD, FL 34769

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KENNETH SAMPSON

PD

06/25/2008

Electronic Signature of Signing Officer or Director

Date