2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000012454

FILED Feb 10, 2009 Secretary of State

Entity Name: FOUNTAIN LAKE OF BRADENTON CONDOMINIUM ASSOCIATION, INC.

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

5620 FOUNTAIN LAKE CIRCLE 5620 FOUNTAIN LAKE CIRCLE - OFFICE

BRADENTON, FL 34207 BRADENTON, FL 34207

Current Mailing Address: New Mailing Address:

4370 S TAMIAMI TRAIL STE 102 137 OSPREY POINT DRIVE

SARASOTA, FL 34231 OSPREY, FL 34229

FEI Number: 20-8254858 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: Name and Address of New Registered Agent:

CASEY CONDOMINIUM MANAGEMENT

4370 S TAMIAMI TRAIL STE 102

SARASOTA, FL 34231 US

WALTER K. CARLSON

137 OSPREY POINT DRIVE
OSPREY, FL 34229 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: WALTER K. CARLSON 02/10/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: CARLSON, WALTER K Name: CARLSON, WALTER K

Address: 5620 FOUNTAIN LAKE CIRCLE Address: 137 OPSREY POINT DRIVE City-St-Zip: BRADENTON, FL 34207 City-St-Zip: OSPREY, FL 34229

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

Name:CARLSON, RICHARD DName:CARLSON, RICHARD DAddress:5620 FOUNTAIN LAKE CIRCLEAddress:16560 HUTCHISON ROADCity-St-Zip:BRADENTON, FL 34207City-St-Zip:ODESSA, FL 33556

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

 Name:
 SUSLA, DAVID
 Name:

 Address:
 450 47TH ST WEST
 Address:

 City-St-Zip:
 BRADENTON, FL 34210
 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: WALTER K. CARLSON D 02/10/2009