2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N07000000532

Entity Name: SAN MICHELE ANDROS ISLES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O DEAKTOR DEVELOPMENT, INC.
1000 JOHNANNA DRIVE
PITTSBURGH, PA 15237

New Principal Place of Business:

Current Mailing Address:

C/O DEAKTOR DEVELOPMENT, INC.
1000 JOHNANNA DRIVE
PITTSBURGH, PA 15237

New Mailing Address:

C/O DEAKTOR DEVELOPMENT, INC.
803 DEVONSHIRE STREET
PITTSBURGH, PA 15213

FEI Number: 20-8241249 **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:

BSPA CORPORATE SERVICES, INC.
350 E. LAS OLAS BLVD., SUITE 1000
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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: BSPA CORPORATE SERVICES
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DEAKTOR, SCOTT I
Address: 1000 JOHNANNA DRIVE
City-St-Zip: PITTSBURGH, PA 15237

Title: TSDV ( ) Delete
Name: DEAKTOR, MARSHA
Address: 1000 JOHNANNA DRIVE
City-St-Zip: PITTSBURGH, PA 15237

Title: D ( ) Delete
Name: WILES, MARK
Address: 8865 W. OKEECHOBEE BLVD., UNIT 308
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SCOTT DEAKTOR PRES 04/29/2009
Electronic Signature of Signing Officer or Director — Date