

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000000608

FILED
Oct 20, 2009
Secretary of State

Entity Name: THE DELEON HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1251 S. LINCOLN AVE.
CLEARWATER, FL 33756

New Principal Place of Business:

10824 N. DALE MABRY HWY.
TAMPA, FL 33618 US

Current Mailing Address:

1251 S. LINCOLN AVE.
CLEARWATER, FL 33756

New Mailing Address:

10824 N. DALE MABRY HWY.
TAMPA, FL 33618 US

FEI Number: 26-0350406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLEKSAK, MARK
1251 S. LINCOLN AVE.
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

LINTON, JOHN T
10824 N. DALE MABRY HWY
TAMPA, FL 33618 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: JOHN T. LINTON

10/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: OLEKSAK, MARK
Address: 1251 S. LINCOLN AVE.
City-St-Zip: CLEARWATER, FL 33756

Title: DV () Delete
Name: OLEKSAK, MARGARET D.
Address: 1251 S. LINCOLN AVE.
City-St-Zip: CLEARWATER, FL 33756

Title: DST () Delete
Name: CUTT, ANN
Address: 1251 S. LINCOLN AVE.
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MASTRORIO, DAVID M
Address: 10824 N. DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618 US

Title: STD (X) Change () Addition
Name: LINTON, JOHN T
Address: 10824 N. DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618 US

Title: VPD (X) Change () Addition
Name: SHIMBERG, SCOTT
Address: 10824 N. DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618 US

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: DAVID M. MASTRORIO

PD

10/20/2009

Electronic Signature of Signing Officer or Director

Date