

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N07000010553

**FILED**  
**Jun 19, 2013**  
**Secretary of State**

**Entity Name:** WALDEN OAKS OF WEST MELBOURNE HOMEOWNERS ASSOCIATION INC

**Current Principal Place of Business:**

803 PAW PRINTS AVE  
MELBOURNE, FL 32935 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 361877  
MELBOURNE, FL 32936

**New Mailing Address:**

**FEI Number:** 26-3816152

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONNOR, DANA M  
P. O. BOX 361877  
MELBOURNE, FL 32936 US

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

CONNOR, DANA M  
7884 LIME GROVE AVE  
MELBOURNE, FL 32904 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: DANA CONNOR

06/19/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CONNOR, DANA M  
Address: P. O. BOX 361877  
City-St-Zip: MELBOURNE, FL 32936 US

Title: SECY  
Name: CONNOR, DOUGLAS E  
Address: P.O. BOX 361877  
City-St-Zip: MELBOURNE, FL 32936 US

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: DANA CONNOR

DIR

06/19/2013

Electronic Signature of Signing Officer or Director

Date