

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N08000007055

**FILED**  
**Jun 22, 2011**  
**Secretary of State**

**Entity Name:** WESTWOOD OF ORLANDO CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5850 T.G. LEE BLVD., SUITE 600  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

882 JACKSON AVE  
ORLANDO, FL 32822

**New Mailing Address:**

5850 T.G. LEE BLVD., SUITE 600  
ORLANDO, FL 32822

**FEI Number:** 37-1587764

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JORDAN, BRETT M  
882 JACKSON AVE.  
WINTER PARK, FL 32789 US

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

SCHOTT, ADAM C  
5850 T.G. LEE BLVD., SUITE 600  
ORLANDO, FL 32822 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: ADAM SCHOTT

06/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCHOTT, ADAM  
Address: 5850 T.G. LEE BLVD. SUITE 600  
City-St-Zip: ORLANDO, FL 32822

Title: VPD  
Name: MAHON, CHRISTINA  
Address: 5850 T.G. LEE BLVD. SUITE 600  
City-St-Zip: ORLANDO, FL 32822

Title: STD  
Name: AULD, JOHN  
Address: 5850 T.G. LEE BLVD. SUITE 600  
City-St-Zip: ORLANDO, FL 32822

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: ADAM SCHOTT

PD

06/22/2011

Electronic Signature of Signing Officer or Director

Date