

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000010214

FILED
Oct 21, 2009
Secretary of State

Entity Name: 830 EAST PARK AVENUE CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

830 EAST PARK AVENUE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

830 EAST PARK AVENUE
TALLAHASSEE, FL 32301

New Mailing Address:

830 EAST PARK AVENUE
1104
TALLAHASSEE, FL 32301

FEI Number: 04-3605600 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

MANAUSA, DANIEL E
3520 THOMASVILLE RD
4TH FLOOR
TALLAHASSEE, FL 32309 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: DANIEL E MANAUSA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MANAUSA, JOE
Address: 830 EAST PARK AVENUE
City-St-Zip: TALLAHASSEE, FL 32301

Title: DVP () Delete
Name: MANAUSA, MICHELLE
Address: 830 EAST PARK AVENUE
City-St-Zip: TALLAHASSEE, FL 32301

Title: DST () Delete
Name: SNYDER, ERIK
Address: 830 EAST PARK AVENUE
City-St-Zip: TALLAHASSEE, FL 32301

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: JOE MANAUSA

DP

10/21/2009

Electronic Signature of Signing Officer or Director

Date