

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000010446

FILED
Oct 06, 2010
Secretary of State

Entity Name: LAGO DEL REY CENTRAL MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

C/O INTEGRITY PROPERTY MANAGEMENT, INC.
953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

C/O INTEGRITY PROPERTY MANAGEMENT, INC.
953 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33071

New Mailing Address:

C/O INTEGRITY PROPERTY MANAGEMENT, INC.
5665 CORAL RIDGE DRIVE
CORAL SPRINGS, FL 33076

FEI Number: 26-4006370

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAYE, ROBERT L ESQ.
ROBERT KAYE & ASSOCIATES, P.A.
6261 NW 6TH WAY, SUITE 103
LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

INTEGRITY PROPERTY MANAGEMENT
5665 CORAL RIDGE DRIVE
CORAL SPRINGS, FL 33076 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 WHITTLE

10/06/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: HANEY, LLOYD
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: DS
Name: LARRONDO, ROSI
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D
Name: SCHWARZ, JODIE
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D
Name: SMITH, DORIS
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D
Name: SOLOMON, ED
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D
Name: SOULE, GARY
Address: 5665 CORAL RIDGE DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

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: LLOYD HANEY

PD

10/06/2010

Electronic Signature of Signing Officer or Director

Date