

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N13000005757

**FILED**  
**Oct 07, 2014**  
**Secretary of State**

**Entity Name:** CORDOVA AT SPANISH WELLS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

24201 WALDEN CENTER DRIVE, SUITE 204  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

%GULF BREEZE MGMT. SVCS. OF SW FL, INC.  
8910 TERRENE CT., #200  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

24201 WALDEN CENTER DRIVE, SUITE 204  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

%GULF BREEZE MGMT. SVCS. OF SW FL, INC.  
8910 TERRENE CT., #200  
BONITA SPRINGS, FL 34135

**FEI Number:** 46-4299698

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

WEIDNER, RALPH L  
8910 TERRENE CT., #200  
BONITA SPRINGS, FL 34135 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: RALPH L. WEIDNER

10/07/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ADAMS, CHRISTOPHER  
Address: 8910 TERRENE COURT, #200  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VTD  
Name: BROWN, KEVIN  
Address: 8910 TERRENE CT., #200  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: SD  
Name: AKAUL, ARJUN  
Address: 8910 TERRENE CT., #200  
City-St-Zip: BONITA SPRINGS, FL 34135

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: CHRISTOPHER ADAMS

PD

10/07/2014

Electronic Signature of Signing Officer or Director

Date