

2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N16955

FILED
Aug 26, 2013
Secretary of State

Entity Name: WESTLAKE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

WESTLAKE CONDO ASSOC.
343 W. CENTRAL AVE STE 102
LAKE WALES, FL 33853

New Principal Place of Business:

343 W. CENTRAL AVE
STE 102
LAKE WALES, FL 33853

Current Mailing Address:

WESTLAKE CONDO ASSOC.
343 W. CENTRAL AVE STE 102
LAKE WALES, FL 33853

New Mailing Address:

343 W. CENTRAL AVE
STE 102
LAKE WALES, FL 33853

FEI Number: 59-2780632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAVEL, JOHN
343 W. CENTRAL AVE
STE 102
LAKE WALES, FL 33853 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: JOHN GRAVEL

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: GRAVEL, JOHN
Address: 343 WEST CENTRAL AVE SUITE 208
City-St-Zip: LAKE WALES, FL 33853 US

Title: PD
Name: GRAVEL, JOHN M
Address: 343 W. CENTRAL AVE STE 102
City-St-Zip: LAKE WALES, FL 33853

Title: SD
Name: HARRELL, SUZANNE
Address: 343 WEST CENTRAL AVE SUITE 103
City-St-Zip: LAKE WALES, FL 33853

Title: D
Name: HARRELL, RONALD
Address: 343 WEST CENTRAL AVE SUITE 103
City-St-Zip: LAKE WALES, FL 33853

Title: VPD
Name: GRAVEL, HEIDI
Address: 343 W. CENTRAL AVE. STE 8
City-St-Zip: LAKE WALES, FL 33853

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: JOHN GRAVEL

PD

08/26/2013

Electronic Signature of Signing Officer or Director

Date