

**2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 31, 2008  
Secretary of State**

DOCUMENT# N19300

Entity Name: PICKETT DOWNS UNIT IV HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2981 WASSUM TRAIL  
CHULUOTA, FL 32766

**New Principal Place of Business:**

**Current Mailing Address:**

1809 E BROADWAY ST  
#327  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 59-3446350      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

CASEL, GLEN  
2981 WASSUM TRAIL  
CHULUOTA, FL 32766      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: GLEN CASEL

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CASEL, GLEN  
Address: 2981 WASSUM TRAIL  
City-St-Zip: CHULUOTA, FL 32766

Title: VPD ( ) Delete  
Name: SALA, JOSEPH  
Address: 2800 WASSUM TRAIL  
City-St-Zip: OVIEDO, FL 32766

Title: S ( ) Delete  
Name: ZALK, KENNETH  
Address: 2761 WASSUM TRAIL  
City-St-Zip: CHULUOTA, FL 32766

Title: TD ( ) Delete  
Name: MUFFULETTO, CHAMBLISS  
Address: 2781 WASSUM TRAIL  
City-St-Zip: OVIEDO, FL 32766

Title: D ( ) Delete  
Name: WHITE, JEFF  
Address: 2720 WASSUM TRAIL  
City-St-Zip: CHULUOTA, FL 32766

**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:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: SPIESS, BRIAN  
Address: 2581 WASSUM TRAIL  
City-St-Zip: CHULUOTA, FL 32766

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: GLEN CASEL

Electronic Signature of Signing Officer or Director

PD

10/31/2008

Date