FILED
2007 JUL 26 PM 3:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT

CR2E051 (1/07)

DOCUMENT # N20471

1. Corporate Name

The Center of Commerce at Orlando Owners' Association, Inc.

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
c/o RREEF 601 South Lake Destiny Road	c/o RREEF 601 South Lake Destiny Road
Suite, Apt. #, etc.: Suite 190	Suite, Apt. #, etc.: Suite 190
City & State: Maitland Florida	City & State: Maitland, Florida
Zip: 32751 Country: USA	Zip: 32751 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 05/05/1987

F.E.I. Number: 592965059 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Bret Anderson

Street Address (P.O. Box Address Not Acceptable): c/o RREEF 601 South Lake Destiny Road

Suite #: Suite 190

City: Maitland State: FL Zip Code: 32751

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I hereby accept the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Bret Anderson Date: _____

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P D	Bret Anderson	c/o RREEF 601 South Lake Destiny Road	Maitland, Florida 32751
VPD	John Frederick	c/o RREEF 601 South Lake Destiny Road	Maitland, Florida 32751
S D	Laura Tyson	c/o RREEF 601 South Lake Destiny Road	Maitland, Florida 32751

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Bret Anderson 7-25-07 (407) 538-1449

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Bret Anderson

Florida Department of State

Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

THE CENTER OF COMMERCE AT ORLANDO OWNERS' ASSOCIATIO

Certificate of Status	0
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