2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N25480

FILED Oct 14, 2005 Secretary of State

Entity Name: ASSOCIATION OF OWNERS OF LAKE HILL CENTER CONDOMINIUM, INC.

Current Principal Place of Business: New Principal Place of Business:

1508 SHADWELL CT 75 FOX RIDGE CT # C HEATHROW, FL 32746 DEBARY, FL 32713

Current Mailing Address: New Mailing Address:

161 E. ROSE AVE 1508 SHADWELL CT HEATHROW, FL 32746

ORANGE CITY, FL 32763

FEI Number: 59-3573219 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: Name and Address of New Registered Agent:

BRIM, JOHN H 161 E. ROSE AVE. ORANGE CITY, FL 32763 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 H BRIM

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

SUAREZ, MARIA A Name: Name: 1508 SHADWELL CT Address: Address: City-St-Zip: HEATHROW, FL 32746 City-St-Zip:

Title: () Delete Title: (X) Change () Addition Name: SHANMUGHAM, SAMPATHKUMAR Name: SHANMUGHAM, SAMPATHKUMAR

Address: 75 FOX RIDGE CT #C Address: 75 FOX RIDGE CT #C City-St-Zip: LAKE MARY, FL 32713 City-St-Zip: DEBARY, FL 32713

Title: STD () Delete Title: STD (X) Change () Addition

WATSON, CINDY WATSON, CINDY Name: Name: 75 FOX RIDGE CT #H 75 FOX RIDGE CT # C Address: Address: City-St-Zip: DEBARY, FL 32713 City-St-Zip: DEBARY, FL 32713

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARIA SUAREZ PD 10/14/2005