2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N27079

FILED Oct 17, 2006 Secretary of State

Entity Name: COMMERCIAL REAL ESTATE WOMEN INC.

Current Principal Place of Business: New Principal Place of 255 SOUTH ORANGE AVENUE SUITE 1700 ORLANDO, FL 32801 US New Principal Place of 420 SOUTH ORANGE A' SUITE 1200 ORLANDO, FL 32801	Business:
SUITE 1700 SUITE 1200	
OREANDO, 1 E 32001 03 OREANDO, 1 E 32001	VENUE US
Current Mailing Address: New Mailing Address:	
255 SOUTH ORANGE AVENUE 420 SOUTH ORANGE A' SUITE 1700 SUITE 12000 ORI ANDO EL 20004	
ORLANDO, FL 32801 US ORLANDO, FL 32801 FEI Number: 59-2960643 FEI Number Applied For () FEI Number Not Applicable ()	US Certificate of Status Desired ()
	. ,
Name and Address of Current Registered Agent: Name and Address of N	lew Registered Agent:
BONIFAY, CECELIA 255 SOUTH ORANGE AVE. SUITE 1700 ORLANDO, FL 32801 US BONIFAY, CECELIA 420 SOUTH ORANGE A' SUITE 1200 ORLANDO, FL 32801 U	
The above named entity submits this statement for the purpose of changing its registered of in the State of Florida.	
SIGNATURE: CECELIA BONIFAY	10/17/2006
Clastronia Cianatura of Dogistarad Agent	
Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS: Title: PD () Delete Title: () Name: DONOVAN, DALE Name: Address: 37 NO ORANGE AVENUE SUITE 500 Address:	Date
OFFICERS AND DIRECTORS: Title: PD () Delete Title: () Name: DONOVAN, DALE Address: 37 NO ORANGE AVENUE SUITE 500 City-St-Zip: ORLANDO, FL 32801 ADDITIONS/CHANGES Title: () Name: Name: Address: City-St-Zip:	Date TO OFFICERS AND DIRECTORS
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES Title: PD () Delete Title: () Name: DONOVAN, DALE Name: Address: 37 NO ORANGE AVENUE SUITE 500 Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: D () Delete Title: () Name: BYRD, L A Name: Address: 315 E ROBINSON ST SUITE 250 Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip:	Date TO OFFICERS AND DIRECTORS Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: DALE DONOVAN PD 10/17/2006