

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N31471

FILED
Oct 21, 2004
Secretary of State**Entity Name:** VILLAS OF POINCIANA HOMEOWNERS' ASSOCIATION, INC**Current Principal Place of Business:**50 CORDONA DR
KISSIMMEE, FL 34758**New Principal Place of Business:****Current Mailing Address:**PO BOX 422891
KISSIMMEE, FL 34742 US**New Mailing Address:****FEI Number:** 59-3213583 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:**HOBBS, MARK W PRES
702 EAST FLAG WAY
KISSIMMEE, FL 34759 US**Name and Address of New Registered Agent:**SHARPE, ONEIL G PRES
2558 BAYKAL DRIVE
KISSIMMEE, FL 34746 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: ONEIL G. SHARPE

10/21/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: HOBBS, MARK W
Address: PO BOX 422891
City-St-Zip: KISSIMMEE, FL 34742 US**Title:** T () Delete
Name: ALVAREZ, ANGELA
Address: 50-F CORDONA DR
City-St-Zip: KISSIMMEE, FL 34758**Title:** T () Delete
Name: HOBBS, REBECCA F
Address: PO BOX 422891
City-St-Zip: KISSIMMEE, FL 34742 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: SHARPE, ONEIL G
Address: PO BOX 422891
City-St-Zip: KISSIMMEE, FL 34742 US**Title:** T (X) Change () Addition
Name: SHARPE, ALEKE L
Address: 2558 BAYKAL DRIVE
City-St-Zip: KISSIMMEE, FL 34746**Title:** VP (X) Change () Addition
Name: WEBB, TYRONE O
Address: PO BOX 422891
City-St-Zip: KISSIMMEE, FL 34742 US

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: ONEIL G. SHARPE

PD

10/21/2004

Electronic Signature of Signing Officer or Director

Date