

# **2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N35014

**FILED**  
**Mar 05, 2014**  
**Secretary of State**

**Entity Name:** SPRINGTREE ISLES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

8438 NW 34TH MANOR  
SUNRISE, FL 33351

**New Principal Place of Business:**

8414 NW 34TH MANOR  
SUNRISE, FL 33351

**Current Mailing Address:**

8438 NW 34TH MANOR  
SUNRISE, FL 33351

**New Mailing Address:**

8414 NW 34TH MANOR  
SUNRISE, FL 33351

**FEI Number:** 65-0190994

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BISHOP, MELANIE  
8438 NW 34TH MANOR  
SUNRISE, FL 33351 US

**Name and Address of New Registered Agent:**

HORSCH, CONNIE  
8414 NW 34TH MANOR  
SUNRISE, FL 33351 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: CONNIE HORSCH

03/05/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BISHOP, MELANIE  
Address: 8438 NW 34TH MANOR  
City-St-Zip: SUNRISE, FL 33351

Title: TR  
Name: HORSCH, CONNIE  
Address: 8414 NW 34TH MANOR  
City-St-Zip: SUNRISE, FL 33351

Title: VP  
Name: DALMACIO, RUBEN  
Address: 8432 NW 34TH MANOR  
City-St-Zip: SUNRISE, FL 33351

Title: SEC  
Name: SEWALIAH, WENDY  
Address: 8480 NW 34 MANOR  
City-St-Zip: SUNRISE, FL 33351

I hereby 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 all other like empowered.

SIGNATURE: MELANIE BISHOP

P

03/05/2014

Electronic Signature of Signing Officer or Director

Date