

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N39052

FILED  
Feb 17, 2009  
Secretary of State

**Entity Name:** JOHIO BAY HOMEOWNERS' ASSOCIATION INC.

**Current Principal Place of Business:**

2443 JOHIO BAY DRIVE  
OCOEE, FL 34761

**New Principal Place of Business:**

**Current Mailing Address:**

2443 JOHIO BAY DRIVE  
OCOEE, FL 34761

**New Mailing Address:**

**FEI Number:** 59-3131761

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HILLMAN, RANDY  
707 MABBETTE ST  
201  
KISSIMMEE, FL 34741 US

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

WATSON, GERALD  
2443 JOHIO BAY DRIVE  
OCOEE, FL 34741 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: GERALD WATSON

02/17/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LASSETER, KEN  
Address: 2510 JOHID SHORES ROAD  
City-St-Zip: OCOEE, FL 34761

Title: B ( ) Delete  
Name: PEREZ, SOCRATES  
Address: 2415 JOHIO SHORES RD  
City-St-Zip: OCOEE, FL 34761

Title: T ( ) Delete  
Name: WATSON, GERALD  
Address: 2443 JOHIO BAY  
City-St-Zip: OCOEE, FL 34761

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: WELLS, JEANESE Y  
Address: 2506 JOHID SHORES ROAD  
City-St-Zip: OCOEE, FL 34761

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: GERALD WATSON

T

02/17/2009

Electronic Signature of Signing Officer or Director

Date