

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N39247

**FILED**  
**Jan 28, 2013**  
**Secretary of State**

**Entity Name:** S.L.E. HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

512 SUN LAKE DR  
PORT ORANGE, FL 32127 US

**New Principal Place of Business:**

6112 HALF MOON DRIVE  
PORT ORANGE, FL 32127 US

**Current Mailing Address:**

512 SUN LAKE DR  
PORT ORANGE, FL 32127 US

**New Mailing Address:**

6112 HALF MOON DRIVE  
PORT ORANGE, FL 32127 US

**FEI Number:** 59-3117374

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, ROBERT  
512 SUN LAKE DR  
PORT ORANGE, FL 32127 US

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

MANCHESTER, RAYMOND  
6112 HALF MOON DRIVE  
PORT ORANGE, FL 32127 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: RAYMOND MANCHESTER

01/28/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MANCHESTER, RAYMOND  
Address: 6112 HALF MOON DRIVE  
City-St-Zip: PORT ORANGE, FL 32127

Title: VPD  
Name: COBB, BRIAN  
Address: 524 SUN LAKE DRIVE  
City-St-Zip: PORT ORANGE, FL 32127 US

Title: TD  
Name: SNYDER, HEIDI  
Address: 6150 HALF MOON DRIVE  
City-St-Zip: PORT ORANGE, FL 32127

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: RAYMOND MANCHESTER

PD

01/28/2013

Electronic Signature of Signing Officer or Director

Date